

# CHEMIST & DRUGGIST

THE NEWSWEEKLY FOR PHARMACY

10 June 1995

## TV exposé turns on Southampton

Not good to talk,  
phone audit shows

BAPW joins in row  
over OPD timetable

Business in focus: size  
isn't everything ...

BTC goes  
for 45 new  
stores as  
profits rise



Six AAH directors go  
in Gehe shake-up

Retail on the slow  
road to recovery?



Sudocrem is proud to accept  
the Mother & Baby Gold Award  
for Product Excellence\*

\*Toiletries and Skincare category

**Sudocrem Antiseptic Healing Cream: Product information**  
**Presentation:** A white emulsified cream containing as active ingredients Zinc Oxide Ph Eur 15.25%, Lanolin (Hypo-allergenic) 4%, Benzyl Benzoate BP 1.01%, Benzyl Alcohol BP 0.39%, Benzyl Cinnamate 0.15%. **Uses:** In the treatment of napkin rash, bedsores, minor burns, eczema, acne, chilblains, surface wounds and sunburn. **Dosage and administration:** To be applied in a thin layer over the affected area with suitable covering, where

necessary. Renew application as required. **Contra-indications:** None. **Warnings:** Keep out of the eyes. **Legal Category:** GSL. **Retail price ex. VAT:** 60g £1.10, 125g £1.83, 250g £3.27, 400g £4.77. **Further information:** Nil. **Product Licence Holder and Number:** Tosara Products Ltd 3430/0001. Sudocrem and Tosara are registered trade marks. Revised April 1994. Pharmax Healthcare, Bourne Road, Bexley, Kent, DA5 1NX.



**NEW**  
**CLINICALLY PROVEN**

# Bazuka that verruca

New Bazuka Gel, with its clinically proven prescription heritage, is targeted for success - in treatment and for your business.

Bazuka offers simple, effective treatment for verrucas, warts, corns and calluses. It dries to form a unique, water-resistant protective barrier designed to help inhibit the spread of the verruca/wart infection, without the need for plasters.

To make its mark, Bazuka will be supported by a hard-hitting National Press and TV campaign, encouraging customers everywhere to visit their local pharmacy.



## FORMS A WATER-RESISTANT BARRIER – NO NEED FOR PLASTERS

**BAZUKA** Trademark and Product Licence held by Diomed Developments Ltd., Hitchin, UK. Distributed by DDD Ltd., 94 Rickmansworth Road, Watford, Herts, WD1 7JJ. **Active Ingredients:** Salicylic Acid BP 12.0% w/w, Lactic Acid BP 4.0% w/w. Also contains: Camphor BP, Pyroxylin BP, Ethanol (96%) BP, Ethyl Acetate. **Indications:** For the treatment of verrucas, warts, corns and calluses. **Directions for adults, including the elderly, and children:** Apply one or two drops to the lesion and allow to dry to form a small white patch. The following day, carefully peel or pick off the dried patch, and apply fresh gel. Once every week, before applying fresh gel, gently rub the treated surface with the emery board provided. Continue treatment until the condition has resolved. This may take up to 12 weeks for certain verrucas and warts. **Contra-indications:** Not to be used on the face or anogenital regions, or by diabetics or individuals with poor blood circulation. Not to be used on moles, birth marks, hairy warts, or any other lesion for which the gel is not indicated. Not to be used in cases of sensitivity to any of the ingredients. **Precautions and Warnings:** Keep away from the eyes, mucous membrane and from cuts and grazes. Avoid spreading onto surrounding normal skin. Do not use excessively. Some mild, transient irritation may be expected, but in cases of more severe irritation, treatment should be discontinued. Avoid inhaling vapour, and keep cap firmly closed when not in use. Avoid contact with clothing, fabrics, plastics and other materials as it may cause damage. Keep all medicines out of the reach of children. **HIGHLY FLAMMABLE** Keep away from flames. Store at room temperature (not exceeding 25°C), with the cap replaced tightly.

FOR EXTERNAL USE ONLY. Legal Category: (P) (PL 0173/0161). Packs: 5g, RSP £3.95 (£3.36 exc. VAT)



It has become increasingly evident in recent months that if community pharmacists are going to survive the upheavals of local pay bargaining, and pull their weight alongside the other professions competing to provide primary healthcare services, they are going to have to collaborate in a way that they have never done before. In an ideal world this would apply as much to the big multiples as to owner managers. In practice, forward-thinking large multiples, such as Boots, seem intent on ploughing their own furrow, and since LPCs are not in a position to help those who are not prepared to help themselves, until recently they have largely had the field to themselves.

More and more involves the pharmacist absenting himself from the pharmacy, a difficult job with the law as it stands. Either the medicines side of the business grinds to a standstill, or it's another lunchtime or evening given up to the call of duty. Pushing for a second pharmacist's allowance as part of the remuneration package has slipped right off PSNC's agenda.

The NPA's new team of regional co-ordinators, if they are to be successful, need to investigate ways of fostering collaboration between independents who probably still perceive the man down the road as competition. Simple arrangements could help. 'Time out' for a proprietor or manager could be found if five pharmacies were to pull together to employ a pharmacist full-time, giving each a day's cover.

Consortia are nothing new. Buying groups have been around for years, but service-orientated groupings are thin on the ground. This will have to change, because apart from Boots and possibly Lloyds, Moss and Hills, few operations have got a sufficiently large local footprint to provide complete packages on their own.

**CHEMIST & DRUGGIST**

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# CHEMIST & DRUGGIST

THE NEWSWEEKLY FOR PHARMACY

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# Meridian TV alleges 'under the counter' POM sales

The Royal Pharmaceutical Society is to investigate allegations that a Southampton pharmacist sold a POM product 'under the counter'.

The allegations were made in Meridian TV's 'Serve You Right'. In the programme, the investigative team attempted to find out how easy it is to buy Dermovate on the black market.

Three pharmacies refused to sell the product but, in Elgon Chemist, Southampton, the pharmacist placed his finger to his lips and told the reporter to come back later at a quieter time. On his return, the journalist was charged \$5 and given 30g of Dermovate cream. No receipts were provided.

To check that the sale was not a one-off, the reporter returned a few weeks later with a secret camera and filmed the same transaction taking place again.

When challenged by the journalist, the pharmacist declined to comment, suggesting that the reporter may have confused the pharmacy with one nearby.

In a statement to *C&D*, Senat Roy, a pharmacist registered at the shop, said: "It was a proper urgent [sic] supply; the film was edited badly and made some false connections with skin lightening cream." Mr Roy refused to confirm that he was the pharmacist filmed by Meridian.

John Ferguson, RPSGB secretary and registrar, says the allega-

tions are being fully investigated.

If there is a case to answer, then prosecution may follow. If found guilty, the pharmacist would also be referred to the Statutory Committee, says Mr Ferguson.

'Serve You Right' also evaluated counselling techniques for sales of P medicines, including Zovirax, He45, Coughcaps, Tagamet and Aller-eze in nine Southampton pharmacies, as a follow-up to a broadcast one year before. In the earlier programme a pregnant woman was sold Triludan Forte in four pharmacies with no questions asked.

This time, however, the majority asked the correct questions – "a great improvement", according to Mr Ferguson.

## Medicines not best GP option?

A \$5,000 publicity campaign has been launched in north east London to persuade patients that prescriptions are not always the GP's best option.

Leaflets and posters are being distributed to pharmacies and surgeries in Barking and Havering, advising patients that the GP might suggest a change in lifestyle or diet instead of a medicine. One leaflet carries the slo-

gan 'Many ills don't need pills' and highlights other options, such as give up smoking, relaxation and a daily walk.

Another leaflet explains the benefits of generic prescribing and advises patients not to worry if the appearance of their tablets varies from time to time: 'As your pharmacist will tell you, they may look different but they are every bit as safe and effective.'

● Publisher Dryden Brown is producing an English version of a guide to minor ailments which was launched by the Dutch government in 1993. The booklet, 'What shall I do?', will be distributed to all households and through GPs this autumn in a 12-month pilot study being carried out by a London FHSA. Pharmacies may also be included in the distribution at a later stage.

### GPs call for private FP10s

Pharmacists' Terms of Service should be changed to allow private dispensing of drugs written on an FP10, say GPs.

General Medical Services Committee prescribing sub-committee chairman Dr George Rae, speaking in *GP* magazine, believes the responsibility for saving patients' money should rest with the pharmacist rather than the GP.

Pharmaceutical Services Negotiating Committee secretary Stephen Axon questions the GPs' role in this matter.

"Pharmacists gain nothing from this," he says. "It smacks of a quick-fit remedy. The PSNC would argue that to make all items significantly below the prescription charge private is not practical, as it would push the prescription charge up." The issue is due to be debated at this month's Local Medical Committees' conference.

## RPSGB re-elects Lewis

Ann Lewis, Royal Pharmaceutical Society president, 1994-95, has been re-elected for a second term.

Ian Caldwell and John Ferguson also retain their posts. David Coleman, however, takes over from William Darling as treasurer.

The Council has also announced the following for distinction in the profession of pharmacy: Michael Barnett, Welsh School of Pharmacy; Edward

Brown, Scottish Pharmaceutical Federation Council; Drummond Forbes, general manager, directorate of medicine, Bristol NHS Trust; Barrie Haigh, Innovex plc; and Dennis Millington, secretary, Rural Pharmacists Association.

For distinction in the science of pharmacy: Roger Small, University of Manchester; and, for distinction in the practice and profession of pharmacy: Brian Evans, South Glamorgan HA.

## Teenage health targeted

The Government is to launch a teenage equivalent to the Health of the Nation document in July.

The Health of the Young Nation is a long-term initiative to improve the health of young people and to equip them to make

informed health and lifestyle choices, says a Department of Health spokesperson.

It will cover a broad range of issues including: smoking, drug abuse, sexual and mental health, suicide, bullying and obesity.

## Telephone enquiries add to dispensing burden

Telephone calls received by community pharmacy add to the dispensing burden, yet are not accounted for financially.

A telephone audit was conducted by Associated Chemists in Sheffield to look into the number and types of enquiries received in the pharmacy over a week. Almost 500 calls were received in that period, taking up 17 hours of staff time.

Pharmacist Iain Nash conducted the audit because he was conscious of the phone ringing all the time and was already familiar with an informal recording form. Another concern was the lack of financial recognition for a service that increased the workload.

The majority of the calls, 62 per cent, came from customers and a fifth were from doctors and other health professionals. Around two-thirds of queries were medical/technical and the same percentage of calls resulted in advice being given. However, this pharmacy may be atypical in that 43 per cent of calls were taken during its extended opening hours (91 hours/week).

Associated Chemists fills a similar quantity of prescriptions now as it did nearly 30 years ago, even with 50 per cent more dispensary staff and up to date technology. Mr Nash puts this down to his customers increasing demand for more information.

**pharmacy week**

ASK YOUR PHARMACIST ABOUT MEDICINES

CONSULTATION HOURS

NAME	TEL
MR. [ ]	TEL [ ]
MR. [ ]	TEL [ ]
MR. [ ]	TEL [ ]
MR. [ ]	TEL [ ]
MR. [ ]	TEL [ ]
MR. [ ]	TEL [ ]
MR. [ ]	TEL [ ]
MR. [ ]	TEL [ ]

Every Welsh pharmacy should soon receive posters to highlight Pharmacy Week (*C&D* May 20, p794). The posters, which are being distributed via family health services authorities, aim to encourage patients to spend three to five minutes talking about their medicines with the pharmacist. Participants should fill in consultation hours themselves and display them in the front window



## Scots' hopes for Pharmacy Week suffer setback

Hopes that Pharmacy Week in Scotland could have been launched by the Scottish minister for health have been dashed.

Organisers, the Scottish Pharmaceutical Federation, the Scottish Pharmaceutical General Council and the Scottish Department of the RPSGB, had hoped to secure the attendance of Lord Fraser to launch the Week.

However, a letter from the Scottish Office, declining the invitation, was received towards the end of May, leaving little time to make alternative arrangements, says Scottish Executive vice chairwoman Elizabeth Roddick.

Coverage for Pharmacy Week will now revolve around local events, while the Scottish national press will be targeted by releases issued by Packer Forbes.

Despite the turn of events, the Scottish Department does not believe that efforts to generate coverage will be compromised. "We are not pushing a separate message; there is no point in re-inventing the wheel," says executive assistant secretary Dr Lind-say Howden.

Alan Cruickshank, SPF chairman, however, feels that a national launch "would have been nice", although he is "quite happy" with the national media effort and the many local initiatives that have been planned.



The joys of summer ...

## Provide free service, says care plan

Birmingham Local Pharmaceutical Committee is advising pharmacists to boycott a community care document calling for pharmacists to provide patients with free medication aids.

The 'Wavy Line' document, determines the responsibilities of carers and community nurses, and relies on the unpaid co-operation of pharmacists to help carers administer medicines.

Under the terms of the document, carers can request that

medication is dispensed weekly in compliance aids, even if the prescription does not stipulate instalment dispensing, and that it is delivered to the patient's home.

However, Birmingham Family Health Services Authority has not provided any extra remuneration for pharmacists. "We feel the most appropriate source of funding is from Community Care funds," says the FHSA's pharmaceutical advisor, Rachel Webb. At the moment, no grant appears to

have been made available.

Birmingham LPC notes the significant pharmaceutical involvement that the terms of the document entail and, while committed to the principles behind Wavy Line, laments that "the profession feels it is being pushed and pushed into new work without any new money", says Tom Wedg-bury, the LPC's secretary.

The LPC is advising pharmacists not to get drawn into the plan on a no-fee basis.

## Product recalls

Zyma Healthcare and H J Heinz Co have issued product recall notices for, respectively, Baby Savlon Spray Antibacterial Surface Cleaner and 163g Minted Vegetables with Lamb (Junior Variety).

Baby Savlon Spray batches numbered T102-107 inclusive are being recalled due to risk of discoloration. Pharmacists with recalled stock should contact their Zyma representatives or Zyma customer services on: 01306 742800. National press advertising will instruct consumers with products from the above batches to seek a refund from retailers.

Heinz is voluntarily recalling all stocks of the babyfood variety from retailers, after a processing fault left small pieces of metal in some cans.

Heinz has been advised that such pieces, if swallowed, would pass through the digestive system and present no danger. Purchases of the variant specified, with product codes 01-97 KL1 0825 00:00 to 01-97 KL1 0825 03:41, should, however, be discarded by consumers and labels returned to Heinz for a refund.

## Dorset plans 'Brown Bag' medicine review

The Dorset branch of the Royal Pharmaceutical Society is hoping to hold a 'Brown Bag' medicine review in all of its 140 contracted pharmacies during Pharmacy Week.

The initiative aims to communicate safety of medicines and will be publicised in local libraries and by a travelling 'Healthmobile', supplied by Dorset Health Commission. There will be displays on sun awareness, smoking cessation and medicine safety.

Additionally during the week, local hospitals will run display stands plus, on Pharmacy Week Saturday, the Royal Bournemouth hospital will hold a public open day.

The Epsom branch, meanwhile, is running a 'Tablets or sweets? Spot the difference' competition for children and adults.

The competition will be part of

the branch's Pharmacy Week stand, which will be displayed for three days in a local shopping centre. The aim is to communicate the need for care when dealing with children and medicines, which may look like sweets. It is hoped that on Pharmacy Week Friday the mayor of Epsom will present prizes, including teddies, for the most accurate entries.

Other activities planned for Pharmacy Week include:

- Mersey branch, which is producing display posters and organising a shopping centre stand and mobile information unit
- Hull branch, which is demonstrating carbon monoxide and peak flow meters on a shopping centre stand
- Sunderland & South Tyneside branch, which is offering advice on asthma, sun care and medicine safety from a local shop.

## Party Week in Croydon

Croydon Local Pharmaceutical Committee is hoping to create a party-type atmosphere in its pharmacies for Pharmacy Week.

The aim is to increase visual awareness of community pharmacy. With this in mind, 30 sweat-shirts (white with the Pharmacy Week logo) have been printed, along with white Pharmacy Week balloons.

These will support a 'Healthmobile' which, on Pharmacy Week Friday, will be manned by pharmacists, specialist health promotion experts and careers advisers, who will run medicine safety competitions and provide leaflets, information and advice on asthma inhaler techniques. They will also challenge smokers with a smokalyser and take blood pressure measurements.

To further publicise the medicine safety message, 'Brown Bag' medicine reviews have also been planned, along with a DUMP campaign. Local newspaper editorial will, hopefully, run in support.

Sponsorship for the initiatives has been provided by the Natwest bank, Unichem and AAH.



## NI Pharmacy Week

Local MPs Dr Joe Hendon and Rev Martin Smith will attend the PSNI Pharmacy Week reception on June 19. Representatives from the NI DHSS are yet to confirm. Twelve local co-ordinators have been recruited to motivate cross province DUMP campaign participation (*C&D* Apr 15, p597).

## Misuse of Drugs Act

Propylhexedrine will be removed from Part III of Schedule 2 to the Misuse of Drugs Act 1971 (class C drugs) under a draft order due to come into effect on September 1 – The Misuse of Drugs Act 1971 (Modification) Order 1995 (HMSO, £0.65).

## Psoriasis Week

The Psoriasis Association, supported by Leo Laboratories, is running a Psoriasis Awareness Week on June 27-July 3. Posters, included in this issue, are suitable for display.

## Pay statistics

NHS prescription and remuneration statistics for England and Wales, April '94-February '95 showed ingredient costs as 729.73p/Rx, generating gross profits of 135.29 p/Rx or 16.6 per cent of total Rx payment.

## Scottish costs

In March, Scottish pharmacists and appliance suppliers dispensed 4,525,805 prescriptions generating ingredient costs of £34,447,259 and gross costs of £41,054,911.

## PAGB: 'Nothing fishy'

The PAGB has dismissed Greenpeace suggestions that fish oils contain excessive levels of contaminants as a gross exaggeration.

## PAGB/RPSGB video

The PAGB/RPSGB Pharmacy Week video (*C&D* May 13, p753) illustrates four common consumer attitudes: the 'battler', who suffers in silence; 'the traditionalist', who trusts only the doctor; 'the worrier', who exercises extreme caution; and 'the impatient', who does not need the pharmacist's advice.

## Pharmacy numbers

There were 21,748 applications in 1995 for pharmacy courses, up from 19,141, an almost 14 per cent increase on 1994, notes the Universities and Colleges Admissions Service.

# BAPW joins in OPD concern

The British Association of Pharmaceutical Wholesalers has joined in the chorus of concern over Original Pack Dispensing.

Noting the reservations of the National Pharmaceutical Association Board (*C&D* June 3, p873) over OPD, the BAPW said it was worrying "that the two organisations whose members probably have most to do to implement the introduction of OPD were not consulted in the plan".

Wholesalers, says BAPW director Michael Watts, will be seeking full reimbursement for all unsold bulk packs – including those returned from pharmacists – otherwise they could be forced to run down all bulk stocks before ordering OPD packs.

Running bulk packs in parallel with OPD – as suggested by the NPA – would place an intolerable burden on space and financial resources. "The reorganisation of

wholesale warehouses to gain the space required will take time and a considerable amount of money," he says.

In addition, the introduction of OPD will exacerbate the identification problems associated with different product strengths; in many instances different strengths look exactly the same, says Mr Watts. "These matters could, and should, have been resolved earlier."

# PAGB against ad ban for topical NSAIDs

Proposals from the Medicines Control Agency to prohibit the advertising to the public of serious musculoskeletal disorders, including arthritis, has been attacked by the over the counter medicines industry.

The proposal throws doubt over the legality of a whole range of indications for currently available OTC pain remedies, argues the Proprietary Association of Great Britain.

The Association believes people who suffer mild arthritic pain should have access to safe and effective OTC products, and that manufacturers should be allowed to advertise such products.

The Medicines Commission recently advised that topical NSAIDs should not be indicated for arthritis, arthritic pain or joint

pain of non-traumatic origin.

The MCA has accepted this advice. Early diagnosis and the involvement of a medical practitioner throughout the course of these diseases is therefore considered essential, the Agency says.

Expert rheumatologists have already advised that the MCA's view is "nonsense", says the PAGB. Expert opinion says that the management of arthritis must proceed in a stepwise manner. Simple analgesics are regarded as first line therapy suitable for almost all cases.

Interested parties have until June 15 to respond to MLX217. Comments should be addressed to Dugan Cummings, Room 1219, Market Towers, 1 Nine Elms Lane, London SW8 5NQ.

# On-site services 'not priority'

Patients, unlike GPs, do not see widening the range of on-site GP surgery services as a priority.

According to a survey in the June issue of *Which?*, patients rated this as a low priority for improvement (12th out of 16), preferring GPs to minimise surgery waiting times and improve patients' ability to get an appointment.

GPs' top priority for improvement was, however, widening the range of on-site services, followed by allowing sufficient consultation time and improving ability to get an appointment.

Commenting on the results, David Plumb, chairman of PSNC's rural practices standing committee, says: "Doctors want to provide additional services, such as dispensing, but this sur-

vey shows it is not what patients are really looking for ... the survey challenges the Government's view that there should be one-stop shopping for healthcare."

Patients of fundholders were also found to be significantly more critical of their GPs than non-fundholder patients, comments *Which?*

● A survey for *Which? Way to Health* showed that only 52 per cent of hospital doctors were confident that NHS patients are treated on an equal basis according to need rather than doctor, compared with 87 per cent of managers and 82 per cent of patients. Patient satisfaction levels with care and facilities remain virtually unchanged since a 1992 survey, despite three years of NHS reforms.

## PSNC advises on bids

Guidance for pharmacists on preparing bids for funding bodies is now available from the Pharmaceutical Services Negotiating Committee.

The guidance, which is available through PSNC's LPC support programme, explains how to prepare a written bid, including sections on demonstrating the value of new pharmaceutical services, making the bid relevant, project evaluation and timetabling.

Additional help on preparing a specific bid is available from PSNC.

● PSNC has also drafted text for a leaflet which LPCs may print and distribute to pharmacists for Pharmacy Week. The leaflet, 'It's only tablets', details the complexity of the dispensing function and highlights additional pharmacy services, such as medicine delivery and diagnostic testing.

## GPs decide on reaccreditation

GPs should be forced to undertake a minimum of 40 hours a year educational training or face losing their licence to practice.

This is the response of the General Medical Services Committee education and audit subcommittee to the 1992 Local Medical Committee conference request that a scheme of reaccreditation acceptable to the profession be devised. GPs are to comment on the report at the forthcoming LMC conference.

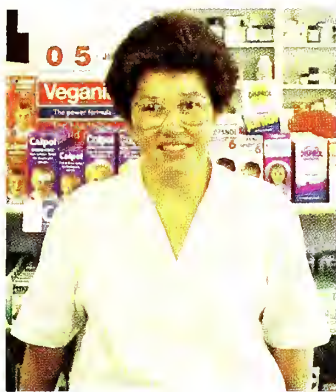
In the scheme, GPs should participate in approved continuing medical education, comprising obligatory, negotiated and self-selected activities. GPs will be contacted on a yearly basis to discuss performance and forthcoming educational activity and, pending a satisfactory outcome every five years, the GP will be reaccredited.

GPs who fail their reviews will be expected to undertake retraining, intensive counselling or personal tuition, where necessary.



## PHARMACY PEN PORTRAIT

## Eileen Gillon



● **Qualified** in 1972 after graduating from Bath and completing her pre-registration year in Boots the Chemists in Cheltenham.

● **Career** continued with BTC in Cheltenham for a further year until 1973 when she joined Clev-erley's, a small chain based in Cheltenham and Gloucester. In 1974, she moved to the National Co-operative Chemists.

Eileen became a proprietor in 1976 when she bought V S Warner, a rural pharmacy in Berkeley. The business was sold in 1985 when Eileen retired.

In 1988, she was brought out of retirement by a local councillor, who wanted a rural pharmacy to be set up in Cam, Dursley. The pharmacy, in Chapel Street, was joined by another in Parsonage Street in 1993. Eileen currently runs both, with the help of two locums and her business manager husband, Chris.

● **Committees** A member of Gloucestershire LPC since 1972, acting as secretary between 1985-1988, and chairman since April, 1994. Secretary of the Society for Bath and the West Country region 1971-1977; and previous chairman of the Cheltenham and Gloucester branch of the Society.

● **Hobbies** Reading, walking, touring, camping and swimming.

● **Pharmacy philosophy** Eileen believes remuneration should be based on capitation and not on dispensing turnover. "There is too much in-fighting in pharmacy. It is not a question of big being best. Although a lot has to be done at local level, I'm not in favour of devolved payment for core services, because this is a *National Health Service*. Any local negotiations should be for extra services with extra remuneration made available."

Eileen would also like to see fairer legislations for rural pharmacies. "We are a county of small pharmacies. If the Treasury got its way and went along with the Audit Commission policy, then 75 per cent of pharmacies in Gloucester would be at risk."



## No innocents in mail order

This week a customer showed me an advertisement offering mail order supplies of capsules of aloe vera from "one of the UK's largest suppliers of vitamins".

The gentleman was seeking my professional opinion about an advertisement that, from a first glance, was recommending aloe vera capsules for the treatment of irritable bowel syndrome. But, on closer reading, it was no more than describing the symptoms of IBS and then using a cut-price offer for aloe vera capsules in order to obtain a mailing list for the distribution of a free catalogue of "over 150 vitamin, mineral and body care products".

This 'implied association' advertisement was no better or worse than many I have seen from other mail order companies. However, this was not from a fringe supplement company but a subsidiary of Goldshield Pharmaceuticals.

Goldshield Pharmaceuticals, now where had I heard that name before? Then I remembered, in my own column of April 22, criticising the company for a direct mail promotion for Imuderm! In reply to that article, Goldshield's managing director, Ajit Patel, protested his innocence of deliberate mail order and maintained his support for community pharmacists (*C&D Letters*, May 6).

# Topical Reflections

But it would appear from this aloe vera advertisement that all had not been revealed by Mr Patel and that Goldshield Pharmaceuticals is no amateur in the mail order industry. Now, I have no objection to the legitimate trading activities of Goldshield Pharmaceuticals, but I have to question whether it is in my long-term commercial interests to support the company by continuing to promote the sale of Imuderm. I have fought hard to establish a small vitamin and dietary supplement section in my pharmacy and have no desire to stock the products of my direct competitors.

## Cola: not a professional image

Many good pharmaceutical products of the past now reside on supermarket shelves, but last week Unichem offered me the chance to fight back against this competition when it announced exclusive rights of pharmaceutical distribution for ... Virgin Cola! Now, I am never one to miss a sales opportunity, but this is one step too far. I have treated Unichem's offer with disdain, but what worries me is that over 200 fellow pharmacists at its recent trade show (*C&D* June 3, p906) obviously disagree with me because they have all signed up to become distributors of this latest pharmaceutical innovation.

In the professional press, acres of trees are being devoted to advancing the cause of professionalism in

community pharmacy, while all around the country immense local effort is being expended by the organisers of Pharmacy Awareness Week to convince local purchasers of that sincerity. Now, in one ill-considered move, Unichem is intent on destroying that effort by encouraging pharmacists to project a front shop image guaranteed to confirm, in the eyes of all those decision-makers, that leopards very rarely change their spots.

## Try asking those in the know!

I have never been one to be over-influenced by advertising and will rarely admit to buying on impulse. However, once in the pharmacy, all things change and here I am all in favour of the heavyweight advertising that provides me with all those keen shoppers seeking the latest in consumer desirables.

I also try to keep one step ahead of those customers who insist on asking for a product by its latest jingle, but I was completely beaten last week by a request for: "You know, it kisses your throat as it goes down." I eventually had to admit defeat, but later I mentioned this incident to Dotty. Very scathingly she looked at me and suggested that next time I should ask one of the girls! Of course, they all instantly identified the mystery product as Halls Soothers and now my reputation as an old fuddy-duddy has been confirmed. It was also forcibly suggested that in future if a customer asks me for a product I cannot identify, then I should ask!



# SCRIPTspecials

## Lundbeck launches Cipramil SSRI in UK



Lundbeck has launched Cipramil (citalopram hydrobromide) in the UK. It is a selective serotonin reuptake inhibitor (SSRI) licensed for the treatment of depression in both its initial phase and as maintenance against relapse or recurrence.

Cipramil is now licensed in 29 countries worldwide and Lundbeck says the UK launch will have the

advantage of established efficacy in around 600,000 patients.

Pre-clinical research has shown Cipramil to be the most selective SSRI available with an affinity for 5-HT receptors that is 1,000 times higher than for other brain receptors. It has relatively low protein binding properties and only a weak effect on cytochrome P450 liver enzymes. These properties decrease Cipramil's potential for drug interactions.

Cipramil is one of two SSRI antidepressants licensed for long-term use. Depression is now considered a lifetime condition with over half of sufferers experiencing three or more episodes and 10-25 per cent of cases becoming chronic. About a quarter of depressive episodes last for a year or more.

**Presentation:** white, oval, film-coated, scored tablets marked with C and N symmetrically.

**Indication:** treatment of depres-

sive illness in the initial phase and as maintenance against potential relapse/recurrence.

**Dosage:** single oral dose of 20mg daily in adults, increased to a maximum of 60mg daily (40mg in elderly). A treatment period of at least six months is usually necessary to avoid potential relapse.

In hepatic impairment, dosage should be restricted to the lower end of the range. Dosage adjustment is not necessary in mild or moderate renal impairment.

**Contra-indications:** in combined use with 5-HT agonists. Safety of Cipramil during human pregnancy and lactation has not yet been established.

**Precautions:** not to be used concomitantly with monoamine oxidase inhibitors or for 14 days after their discontinuation. MAOIs should not be introduced for seven days after discontinuation of Cipramil. 'Serotonin syndrome',

including symptoms of agitation, tremor, myoclonus and hyperthermia, have appeared in a few rare cases.

**Interactions:** MAOIs. Enhanced serotonergic effects have been seen with concomitant use of SSRIs and lithium or tryptophan.

**Side-effects:** nausea, sweating, tremor, somnolence, dry mouth. Intensity and frequency of side-effects decrease as depressive state improves and occurs less often than with tricyclic antidepressants. Patients should be cautioned about their ability to drive or operate machinery.

**Overdosage:** treatment is symptomatic and supportive.

**Legal category:** POM.

**Packs:** blister-packs containing two calendar strips of 14 tablets (£21.28).

**Product licence number:** PL 0458/0058.

**Lundbeck Ltd. Tel:** 01908 649966.

### New ZD lines

The Department of Health has granted zero discount status to Normegon (from May 1) and Orgafol (from June).

### Going, going ...

Stocks of Decaserpyl 5mg and 10mg have been exhausted. Product licences expire in July. Hoechst Roussel Ltd. Tel: 01895 834343.

### Gone ...

Bioglan is ceasing production of Nostrolone with immediate effect. Supplies will no longer be available when wholesaler stocks are exhausted. Bioglan Laboratories Ltd. Tel: 01462 438444.

### Clarity clarification

Schering-Plough has varied Clarity's licence to make the 30-tablet dispensing pack POM. New packs will be available from August 1. In the interim, Schering-Plough will write to pharmacists to remind them that 30-tablet packs of Clarity should only be supplied against a prescription. The five-pack is unaffected by this change and remains available OTC. Schering-Plough Ltd. Tel: 01707 363636.

### MEDICAL MATTERS

## Vision for the future

The British Diabetic Association is launching its 'Vision for the Future' campaign during National Diabetes Week on June 11-17.

There are some 1.4 million diagnosed diabetics in the UK. The condition is the largest cause of blindness in people of working age: 18 per cent of people with non-insulin dependent diabetes will have diabetic retinopathy.

Further data indicate that the prevalence of retinopathy increases with the duration of NIDDM: 23 per cent of those taking insulin and 20 per cent of those not had some degree of retinopathy during the first year

of diagnosis, rising to about 87 per cent and 53 per cent respectively after 20 years.

However, the BDA says that with timely intervention and treatment it is now possible to reduce blindness caused by diabetes by 60 per cent.

A new 'Eye' poster will be displayed on 3,000 Adshel sites nationwide and 11,500 healthcare professionals have been mailed with details of the campaign.

The BDA is also launching a new booklet, 'Diabetes and your eyes', together with an 'Eye' leaflet, during National Diabetes Week.

## Smoking increases breast cancer risk

There is a pronounced increased risk of breast cancer in women who have smoked for over 20 years. The risk becomes significant in those who have smoked for over 30 years.

Breast cancer is the most common cancer in women. The prognosis after treatment, however, has not improved greatly in recent decades, say Danish researchers in this week's *British Medical Journal*.

They interviewed 3,240 women and recorded data on smoking habits. Among the 1,828 smokers, 127 cases of cancer were diagnosed, and 103 cases among the non-smokers.

The study concludes that women who have smoked for over 30 years are 1.6 times more likely to get breast cancer, and that women with breast cancer who smoked were eight years younger than those who did not.

## Homoeopathy ineffective in post-operative pain

Pain after surgery is essentially the same whether treated with a homoeopathic remedy or a placebo, according to a Norwegian study in the *British Medical Journal*.

The question of whether infinitesimally-diluted substances can really exert any biological activity is at the heart of a long-running debate. In this randomised double blind, placebo controlled study, 24 men underwent prophylactic oral surgery to remove impacted molar teeth on two separate occasions.

Treatment with either placebo or homoeopathy started three hours after surgery with a remedy selected by a homoeopathic practitioner (arnica in most cases). Treatment was continued for five days. Pain was rated on a visual analogue scale, and facial swelling at the site of surgery was measured mechanically.

The results indicated no significant effect of homoeopathy on pain or other events after an acute soft tissue and bone injury, conclude the authors. The pain scores of all patients were low after both operations and, despite their inability to identify their treatment regimens, their strong confidence in homoeopathy remained unchallenged.



# PERFECT PACKAGE



- Lennon Pharmaceuticals' individually blistered calendar packs contain full patient information leaflets to comply with European Directive 92/27/EEC.
- Lennon calendar packs only take a minute to dispense, saving you time.
- Lennon individual packaging helps build patient loyalty.
- With Lennon Pharmaceuticals you get exactly what you order including daily deliveries.
- Lennon Pharmaceuticals provide a quality range at competitive prices – a perfect package.

Call our Helpline on **01484 608886** for an explanatory booklet on the EC Directive.

**LENNON**  
PHARMACEUTICALS

BECAUSE YOUR TIME IS INDISPENSABLE



# TAKE *Dual* ACTION!

## DUAL ACTION FOR YOUR CUSTOMERS!

1

Sodium alginate goes to work immediately, creating a protective barrier to acid reflux.

2

Cimetidine controls acid production, providing longer lasting relief than an antacid.



## DUAL ACTION FOR YOU!

1

Exceptional introductory offers recognise your increased involvement in customer counselling for POM to P switches.

2

E8m commitment to bring you customers, including a national TV campaign.

Tagamet\* Dual Action Liquid is now available for the short term symptomatic relief of heartburn and associated acid reflux.

New Tagamet Dual Action Liquid is the *only* product available for your recommendation which not only provides the immediate benefit of other alginate liquids, but also

has the advantage of an H<sub>2</sub> antagonist for long-lasting relief.

Please contact your  
Pharmacy Support Team representative,  
or Freephone  
the OTC Tagamet Information Line on  
**0500 100 222.**

**Product Information:** **Presentation.** A white suspension with an odour of fruit and mint containing 500 mg sodium alginate B.P.C. and 200 mg cimetidine per dose. **Use.** Short term symptomatic relief of heartburn, associated with acid regurgitation, especially if provoked by bending over or lying supine. **Dosage and administration Adults (incl. the elderly), children 16 years and over.** 10 ml suspension when symptoms appear. If symptoms persist for more than 1 hour after the first dose, a second dose (10 ml) may be taken, but no more than 2 doses in any 4 hours and no more than 4 doses in any 24 hours. Treatment should not be continued for more than two weeks. If symptoms persist for more than two weeks or recur regularly, a doctor should be consulted. Not to be given to children under 16 years of age. **Contraindications.** Hypersensitivity to cimetidine or any of the other constituents. **Precautions.** Not recommended in patients with impaired renal function, hepatic impairment, taking oral anticoagulants, phenytoin, theophylline, intravenous lignocaine; middle aged or older patients with changing dyspeptic symptoms, any patients with unintended weight loss and dyspeptic symptoms, because of potential delay in diagnosis of gastric cancer; with compromised bone marrow; in pregnancy and lactation. **Warnings.** Seek a doctor's advice in patients with any other illness; using any medication, under medical supervision for other reasons; with a history of peptic ulcer who are now using NSAIDs, especially the elderly. Contains 200 mg cimetidine per 10 ml dose and this should be included in the daily allowance of patients on sodium restricted diets. **Adverse reactions.** Diarrhoea, dizziness, rash, urticaria, headache, constipation, occasional liver damage, confusional states (usually in the elderly or very ill); all reversible. Rarely thrombocytopenia, leucopenia, neutropenia, reversible, very rarely hepatitis, interstitial nephritis, acute pancreatitis, headache, myalgia, arthralgia, fever, sinus bradycardia, tachycardia and heart block, aplastic anaemia, pancytopenia and encephalitis. Reports of alopecia and very rarely reports of impotence but no causal relationship has been established at prescribed therapeutic doses. **Product licence number.** 2/0232. **Retail Price.** (200 ml) £4.99. **Legal category.** P. **Date of preparation.** 1997. **Authorisation.** SMH, Beecham Consumer Healthcare, SB House, Brentford, Middlesex, TW8 9BD. Telephone number: 0181 560 5151.

**SB SmithKline Beecham  
Consumer Healthcare**

\*Tagamet is a registered trademark of Smith Kline & French Laboratories Limited.



## Polytar ups the stakes

Polytar, the tar-based treatment for itchy, scaly scalp conditions, is upping the stakes with a new 3 in 1 formulation.

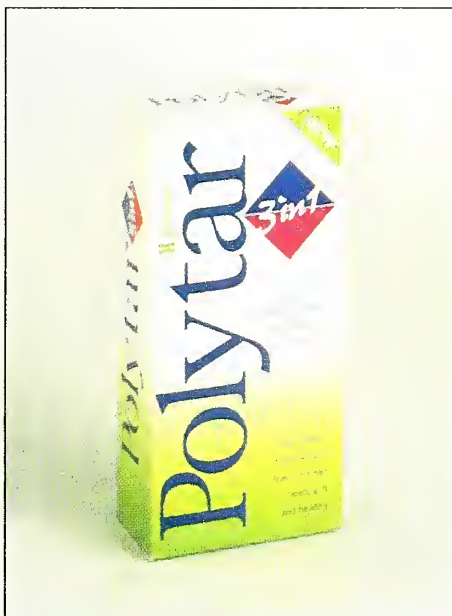
It combines its scalp treatment with the benefits of a 2 in 1 conditioning shampoo.

To coincide with the launch, packs have been updated for a more contemporary image.

Available from mid-July, the new formulation will retail at \$3.29 (125ml). New point of sale material includes a counter display unit and shelf edger, designed to display the 3 in 1 alongside the original formula.

● The Polytar Freefone Scalp Helpline (0800 626875), which was launched in May, has reported receiving 1,000 calls in its first two weeks.

**Stiefel Laboratories (UK) Ltd. Tel: 01628 524966.**



## Wake up to Somnifex sales

Smithkline Beecham is supporting its recently relaunched Somnifex brand with a display and education package. Produced in durable Perspex and plastic, a new counter display unit has an integral consumer leaflet holder. There is also a three-dimensional window display, card leaflet holder and consumer leaflets.

The education pack is targeted at pharmacy assistants and gives advice on how to combat sleeplessness. It includes Filofax inserts for the SB Pharmacy Education Programme folders and A5 laminated reminder cards. **Smithkline Beecham Consumer Healthcare. Tel: 0181 560 5151.**



## Grow that sanpro with Pop-Ins

To increase trial of Pop-Ins sanitary protection disposal bags in the travel, school and post-natal markets, Poly-Lina has scheduled a \$250,000 package of brand support.

For the first time, Pop-Ins are to feature in the new mother Bounty pack, while reader give-aways have been scheduled. In-

store support includes the summer season launch of a Pop-Ins ten travel pack (rsp \$0.29) with merchandiser, free give-away packs and money-off leaflets. The leaflets explain Pop-Ins and the brand's 'wrap and bin' philosophy.

**Robinson Healthcare. Tel: 01246 220022.**

## Pharmacy to the rescue with flower remedies

Pharmacies are set to come to consumers' rescue later on this year, thanks to Nelson's Bach Flower Remedies.

Since the range was relaunched last September, pharmacy distribution has increased

by 30 per cent, says brand manager Ed Comins. In addition, sales have increased by 50 per cent, with Rescue Remedy sales up 60 per cent.

Nelson is to launch a company-wide complementary therapies

merchandising competition in July which includes national finals.

In September, the company will introduce an interactive pharmacy assistant education pack.

**A Nelson & Co Ltd. Tel: 0181 946 8527.**

## Arret's new insurance policy

Sporting brighter and bolder packaging, Arret is being promoted this summer with a 'holiday health insurance' message.

The campaign includes insertion in travel ticket wallets through major tour operators. The promotion will reach more than one million holidaymakers with a 'shopping checklist' of pharmacy products together with holiday health information and details of Arret.

The theme will be carried through to national women's magazines and colour supplements in an advertorial programme breaking in July.

New point of sale material is available which includes a supply of shopping checklists in

dispensers. The company is also offering bonus deals on top of the basic 33 per cent POR.

Pharmacy assistants are also being targeted in a competition which tests product knowledge. Instant prizes include beach towels and cooler bags.

**Centra Healthcare. Tel: 01494 450778.**



## Baby travel's in the bag

Nappy Sacks from Poly-Lina are to have new, more convenient packaging and £250,000 of consumer support.

Packs of 50 and 100 sacks have lost their tissue box-style packaging in favour of a cling film roll. The idea, says the company, is to boost take-up in the baby travel market.

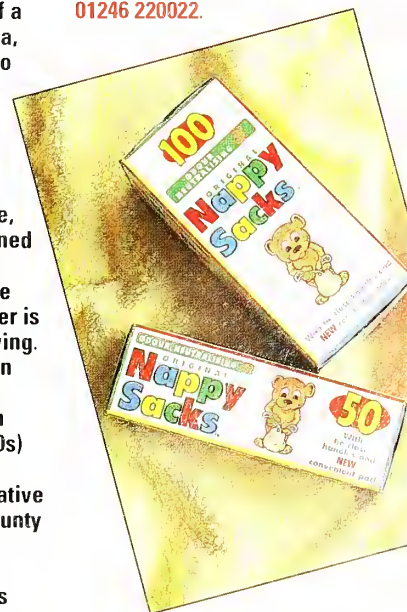
Additional features include a lock-in tab for safety and to maintain the fragrance, and a slightly redesigned livery and brand logo.

The advantage of the redesign for the retailer is a 30 per cent shelf saving. Packs of 100 sacks can also be merchandised vertically; rsps remain unchanged at £1.69 (50s) and £2.99 (100s).

Support for the initiative includes: on-going Bounty pack sampling and money-off coupons, summer and Christmas

season PR, plus a covermount on *Practical Parenting*. Free give-away samples, shelf talkers and a Pharmacy-only consumer relaunch leaflet are also available.

**Robinson Healthcare. Tel: 01246 220022.**





# Gillette opts for Satin Care

Building on the momentum created by Gillette Sensor for Women, Gillette is launching two new female shaving products:



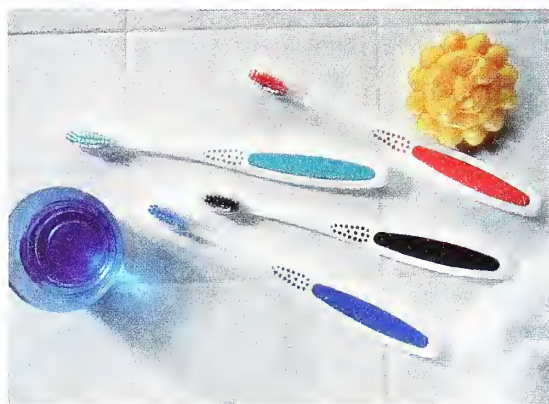
Satin Care and Plus for Women.

Satin Care (\$2.79, 7oz) is the first non-soap-based moisturising shave gel, claims the company. Its formulation includes seven moisturisers and skin conditioners. It is available in two variants: Extra Moisturising Formula for dry skin and Gentle Formula with aloe vera for sensitive skin. Both products have a distinctive fragrance that combines roses and jasmine.

The new Gillette Plus for Women shaver (\$1.25, pack of four) uses twin-blade technology and a new moisture-rich lubricating strip.

Gillette is supporting the launch with a \$2.5 million advertising campaign.

**Gillette UK Ltd. Tel: 0181 560 1234.**



## Wisdom conforms to contours

With the introduction of its new brush, Contour, Wisdom is breaking out of the traditional toothbrush mould.

Aimed at the premium adult sector, it has an extra-wide, ergonomic handle; a long neck to provide improved access to all areas of the mouth; a rounded head (with two sizes); and graduated end-rounded filaments (in both medium and firm textures).

Retailing at £2.25, the brushes are supplied in

four-dozen display packs. New point of sale material for mid- and end-gondola, and bookcase displays will be available to support the launch, including a merchandising unit specially developed for independents.

Wisdom is supporting the launch with a £2.5 million campaign, including a TV commercial which breaks in July.

**Wisdom Toothbrushes. Tel: 01440 714800.**

## Listerine hits the small screen with new commercial

Warner Wellcome has waved goodbye to Clifford the Dragon and adopted a new upbeat TV image for its Listerine mouthwash.

The new 'Listerise your mouth to life' commercial broke last week and presents a stream of vibrant images of the brand, showing the invigorating sensations that characterise the product. The soundtrack is Tom Jones' version of Prince's 'Kiss'.

The £1.7 million campaign will run on national TV and satellite for the whole of June and July, with a second burst planned for later in the year. To target a younger audience, it will also be seen in selected cinemas nationwide during the



summer months. A print campaign is to run too.

To support this heavy programme of advertising, a sampling campaign, comprising two million

samples of Coolmint Listerine, is also taking place.

**Warner Wellcome Consumer Healthcare. Tel: 01703 641400.**

## Curl up & dye

Two in one fever has hit the mascara market with the launch of Max Factor's Curve & Curl Mascara.

The 2 in 1 mascara curls and colours lashes through the use of a curved, hollow-filament brush, and lash lengthening and thickening mascara.

It has a conditioning formula which contains panthenol. It is also fragrance- and fibre-free, hypo-allergenic and suitable for sensitive eyes. It will retail at \$3.99 and comes in three shades.

**Procter & Gamble Cosmetics & Fragrances Ltd. Tel: 01202 524141.**

## Vaseline skin-friendly deos on TV

Elida Gibbs is supporting the launch of Vaseline Intensive Care Skin Friendly Anti-Perspirant Deodorants with a \$5.4 million campaign.

The multi-media promotion will gain 90 per cent awareness among key audiences, the company says, with \$4.1m being spent on television ads and \$1.3m on national press.

The TV ads focus on the range's unisex appeal and the concept of 'Skin science updates'. The

press campaign has a two-pronged approach which begins with an awareness-raising ad, then moves onto an educational insertion, 'Crème de la crème'.

**Elida Gibbs Ltd. Tel: 0171 486 1200.**



## Brut force

Elida Gibbs is relaunching its male toiletries line, Brut, with new packaging and updated pack graphics.

A new eau de toilette (\$7.95) is also key to the relaunch.

The packs now include a stronger logo and an embossed leather-effect green background. The eau de toilette has been added following its success in continental Europe.

**Elida Gibbs Ltd. Tel: 0171 486 1200.**

## Worth-y extension for men

Worth Fragrances is extending its Worth Pour Homme range with the introduction of a 100ml eau de toilette spray.

As an introductory offer, the new spray will be available in a special limited edition pack containing a free designer-style ballpoint pen.

Packaged in blue and paisley livery, it has a suggested rsp of £11.95 (£3.00 less than the stand-alone edt spray).

**Worth Fragrances. Tel: 0181 680 5535.**



# BLOOMING BRILLIANT FOR HAYFEVER

## TRILUDAN FORTE

TERFENADINE

- ✿ ONE A DAY  
ANTIHISTAMINE
- ✿ FAST ACTING  
ANTIHISTAMINE
- ✿ RAPID RELIEF  
FROM HAYFEVER  
AND OTHER  
ALLERGY SYMPTOMS
- ✿ LASTS ALL DAY
- ✿ AVOIDS  
DROWSINESS

Treating hayfever is our forte.

#### Triludan/Triludan Forte Product Information

**Presentations:** Triludan Tablets: Each tablet contains 60mg Terfenadine. Triludan Forte Tablets: Each tablet contains 120mg Terfenadine. **Uses:** Antihistamine indicated for symptomatic relief of hayfever, allergic rhinitis and allergic skin conditions. **Dosage and Administration:** Adults and Children over 12 years: As a single or two divided doses: Allergic skin conditions: 120mg daily. Hayfever, allergic rhinitis: Starting dose 60mg daily, increase to 120mg daily if required. Children: Allergic skin conditions, hayfever, allergic rhinitis: 6-12 years: 30mg twice daily. Do not exceed the maximum recommended dose. **Contra-indications, warnings etc.** Contra-indications: Concomitant use with oral ketoconazole or itraconazole or erythromycin. Use in patients with significant

hepatic dysfunction. Known hypersensitivity to the drug. **Warnings:** QT prolongation and/or ventricular arrhythmias, including torsades de pointes have been reported at doses higher than those recommended and at normal doses in patients whose Terfenadine metabolism is impaired by drugs or by liver disease (see 'Contra-indications'). If syncope occurs, Terfenadine should be discontinued and the patient evaluated for potential arrhythmias. **Precautions:** Terfenadine is not recommended in patients in whom electrolyte imbalance or prolonged QT interval are known or suspected. Concomitant use of Terfenadine is not recommended in patients receiving potentially arrhythmogenic drugs and those producing electrolyte imbalance, astemizole. Although evidence is lacking, the risk of arrhythmia might be increased (see 'Warnings'). Side effects

The following side effects have been reported: abdominal pain and dyspepsia, alopecia, anaphylaxis, angioedema, arrhythmias, bronchospasm, confusion, convulsions, depression, dizziness, headache, insomnia, jaundice, liver dysfunction, menstrual disorders, myositis, osteoarthritis, pain, nightmares, palpitations, paraesthesia, photosensitivity, rash, sweating, syncope (see 'Warnings'), tremor, visual disturbances. In objective tests Triludan has been shown to be free from central nervous system side effects. Reports of drowsiness are extremely rare but it is advisable to check the individual response before driving or performing complicated tasks. **Drug Interactions:** Use with oral ketoconazole or itraconazole is contra-indicated. Use with erythromycin is contra-indicated. Concurrent use with other imidazole oral antifungals or other

macrolide antibiotics is not recommended. Concurrent use of drugs with arrhythmogenic potential or those causing electrolyte imbalance is not recommended (see full data sheet). **Pharmaceutical:** Triludan Tablets Packs of 10 tablets. Triludan Forte Tablets Packs of 7 tablets. **Product Licence Numbers:** Triludan Tablets 44250024. Triludan Forte Tablets 44250091. **Retail Price inc. VAT:** Triludan Tablets pack of 10 £2.89. Triludan Forte Tablets pack of 7 £3.89. **Date of preparation:** March 1995. Further information including Product Data Sheet is available from: Marion Merrell Dow Ltd, Lakeside House, Stockley Park, Uxbridge, Middlesex UB11 1BE. Marion Merrell Dow and Triludan are registered trademarks.



...sufferers need  
immediate relief'



**Hayfever relief  
'within 7 days of  
beginning treatment'<sup>1</sup>**



## Hayfever relief for when every second counts

# Otrivine<sup>®</sup> Antistin<sup>®</sup>

# Fast acting hayfever relief all in the blink of an eye

**CIBAVision®**  
**Ophthalmics**

[illegible]

© VCA Reg. U.S. Pat. & Tm. Off. 1995.

Ref: J Martindale, The Extra Pharmacopoeia 30th edition (1993) 1142-1145

# New-look little Devils



The new-look range of 12 Stain Devils has been repackaged in a bottle shape with on-pack graphics showing which stains can be removed.

The total support campaign, worth \$1.5 million, also includes new display stands, point of sale material and consumer offers through women's magazines.

**Dendron Ltd. Tel: 01923 229251.**

## Launches from Zorbit

Targeting the upper end of the market is Simply Irresistible, two collections of co-ordinated bedding and accessories – Foxwood Tales and Lazy Days. Both collections are to be advertised in the consumer press.

**Zorbit Babycare. Tel: 01942 497191.**

## Bonus bonanza

The bonus scheme includes every product in the company's portfolio.

## Surgical deals

Pharmacists ordering six or more packs of Smith & Nephew/own-label sterile dressings can benefit from a 28 per cent discount off the normal trade price of \$5.53.

In the second promotion, 11 cordless telephones are up for grabs in a free prize draw for orders of over £200. There are over 100 lines to choose from with discounts of up to 18 per cent.

**Unichem plc. Tel: 0181 391 2323.**

## Daktarin number

**The contact number for the Janssen Pharmacy Division is 01494 567567, and not as reported in last week's Counterpoints.**

## July buys

**The Slimfast range of slimming products and razors from Wilkinson Sword and Gillette are top of the best buys in AAH Pharmaceuticals' monthly offers magazine for July.**  
**AAH Pharmaceuticals Ltd.**  
**Tel: 01928 717070.**

## Twist & pout

**This September, Parfums Paloma Picasso is introducing a refillable lipstick, Refillable Mon Rouge. The designer's signature embellishes the cap.**

**Prestige & Collections Ltd. Tel: 0181 979 6699.**

## Merocet prices

**From July 1, 1995, the price of Merocet Mouthwash will rise to £2.89 (rsp).**  
**Marion Merrell Dow Ltd**  
**Tel: 0181 848 3456.**

## Recharge!

**Varta has launched a new range of nickel hydride rechargeable consumer batteries.**  
**Varta Ltd. Tel: 01460 73366.**



For relief  
from eczema,  
employ a  
double agent.

Presenting Double Agent Eurax Hc.

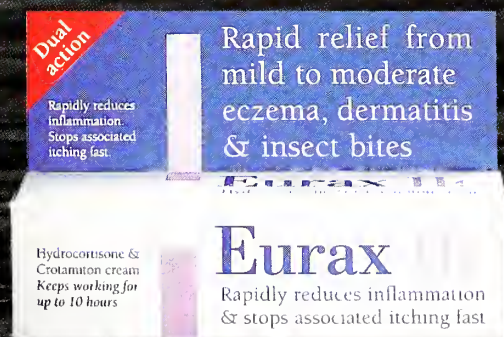
Mission: To locate and eliminate itching and inflammation caused by mild to moderate eczema, contact dermatitis and insect bites.

Weapons: Crotamiton to relieve itching, Hydrocortisone to reduce inflammation.

Duration of Mission: Up to 10 hours.

Status: The only combination steroidal product available OTC for eczema.

Eurax Hc. Licence to Quell.



ciba ZYMA HEALTHCARE IS PART OF THE CIBA GROUP



ACTIVE INGREDIENTS: Eurax Hc contains Crotamiton BP 10% and Hydrocortisone BP 0.25%. Indications: Relief of inflammation and pruritus associated with irritant contact dermatitis, allergic contact dermatitis, insect bite reactions and mild to moderate eczema. DOSAGE AND ADMINISTRATION: Adults and children over 10 years: Apply sparingly over a small area twice a day for a maximum period of 1 week. Occlusive dressings should not be used. Not recommended for children under 10 years. Contra Indications: Hypersensitivity to any component of the formulation. Bacterial, viral or fungal infections of the skin. Acute exudative dermatoses. Application to ulcerated areas. Use on the eyes/face, ano-genital region, broken or infected skin including cold sores, acne and athletes foot. Side-effects: Occasionally at the site of application signs of irritation such as a burning sensation, itching, contact dermatitis/contact allergy may occur. Use in pregnancy or lactation should only be at the doctor's discretion. LEGAL CATEGORY: P. PRODUCT LICENCE NUMBER: 0001/3010R. DISTRIBUTOR: Zyma Healthcare, Holmwood, RH5 4NU. DATE OF PREPARATION: April 1995. PRICE: £2.59. 0595/082



# A real tonic from English Grains

Yestamin Brewer's Yeast is extending its range into the tonic market.

Containing a combination of brewer's yeast (300mg) with B vitamins, glucose (30mg) and caffeine (30mg), Yestamin Plus is a tonic for the relief of temporary tiredness and listlessness.

It is available in a 45-tablet blister pack and is priced at £2.55.

Two tablets should be taken three times a day, recommends the company, but excessive amounts of tea and coffee should be avoided.

It is suitable for vegetarians, but is not recommended for children or women who are pregnant or breastfeeding.  
**English Grains Healthcare. Tel: 01283 221616.**



## High and mighty cleansers

Allergan has developed a display tower for its Complete contact lens protein remover tablets.

The tall dispenser, which can sit on the counter or by a till, features instructions showing customers how the protein remover tablet and

the one-bottle solution work for soft contact lenses.

The dispensing tower holds 14 packs of Complete tablets. Pharmacies which use one can have it filled up for the price of 12. The offer ends on July 31.

**Allergan Ltd. Tel: 01494 444722.**

## Efamol doormat drop

This month, over one million households will receive a targeted communication through their letterboxes from evening primrose oil advocate, Efamol.

And consumers who visit their local Efamol stockist can

purchase any product from the Efamol range and send in their bar code and till receipt to receive two free bottles (50ml each) of essential oils (worth £5.99).

The offer closes on July 31.

**Zyma Healthcare. Tel: 01306 742800.**

## Zyma launches Nicotinell Smokers Network

Zyma has launched a nationwide support scheme for smokers who want to quit the habit: the Nicotinell Smokers Network.

Aiming to provide non-professional moral support for those trying to quit smoking, the Network will be manned by volunteer

co-ordinators in each region.

The advent of the scheme is being pushed by a PR drive in the consumer press and newspapers, and follows in the wake of a national TV campaign.

**Zyma Healthcare. Tel: 01306 742800.**

## Pharmaton Capsules on show

Pharmaton Capsules is introducing new shelf display units in a move to raise the profile of the brand in the 'front of house', says Windsor Healthcare.

The new display unit is in the brand colours of orange and white, and is

designed to hold two empty Pharmaton Capsules' boxes and jars – as well as stocks of new consumer leaflets.

A new information booklet is also available to pharmacists.

**Windsor Healthcare Ltd. Tel: 01344 484448.**

## ON TV NEXT WEEK

**Beckman Stain Devils:** GMTV

**Canderel Chocolate:** All except GMTV & C4

**Delial Sun Care:** C, A, HTV, W, M, CAR, C4

**Dove Bar:** All areas

**Fujicolor Super G Film:** All areas & C4

**Ibuleve Gel:** C4

**Ibuleve Spray:** C4

**Imodium:** All areas

**Johnson's Baby Bath:** All areas including satellite

**Kodak Fun Single Use Cameras:** BskyB & C4

**Listerine:** CAR, M, A, C

**Mum Deodorant:** All areas except B, CTV, W, GMTV

**Natural Instincts:** GTV, U, STV, C, A, HTV

**Otex Ear Drops:** C4

**Predictor:** C, A, M, C4

**Seven Seas Cod Liver Oil:** G, Y, HTV, C4, GMTV

**Silvikrin:** All areas

**GTV** Grampian, **B** Border, **BSkyB** British Sky Broadcasting, **C** Central, **CTV** Channel Islands, **LWT** London Weekend, **C4** Channel 4, **U** Ulster, **G** Granada, **A** Anglia, **CAR** Carlton, **GMTV** Breakfast Television, **STV** Scotland (central), **Y** Yorkshire, **HTV** Wales & West, **M** Meridian, **TT** Tyne Tees, **W** Westcountry



**PRODUCT INFORMATION**  
**Opticron Allergy Eye Dro Solution** containing sodium cromoglycate 2.0% w/v w benzalkonium chlorid disodium edetate, purified water. **Use:** For fast, effective treatment of itchy, watery inflamed eyes caused by seasonal allergic conjunctivitis. **Contraindication:** Hypersensitivity to any of the ingredients. **Precautions:** Do not use whilst wearing soft contact lenses. Caution should be exercised during the first trimester of pregnancy. Discard any remaining contents four weeks after opening the bottle. **Warnings:** If patients suffer from allergic eyes for more than 3 months of the year, they should see a doctor or pharmacist. This product should not be used continuously for more than 3 months without the advice of a doctor. **Dose:** 1 or 2 drops into each eye 4 times daily. **Side-Effects:** Transient burning, stinging, blurring of vision. **Packaging quantities:** 5ml and 10ml bottles. **RSP:** £2.99 for 5ml, £3.99 for 10ml. **Legal category:** P. **Product licence number:** 0113/0161. **Licence holder:** Fisons Plc.

**Opticron**  
ALLERGY EYE DROPS



**Resiston One:** 10ml purple bottle containing a solution of sodium cromoglycate BP 0.025% w/v. **Inactive ingredients:** Benzalkonium chloride, disodium edetate BP. **Use:** Prevention, relief and treatment of allergic rhinitis (seasonal and perennial). **Dosage and Administration:** Adults and children over 5 years; one spray in each nostril four times a day. **Contraindications:** Known hypersensitivity to constituents. **Precautions:** Caution in pregnancy; slight risk of rebound nasal congestion on prolonged use. **Side-Effects:** Occasionally, nasal irritation during the first few days of use. **Retail Price:** 10ml bottle £3.99. **Legal Category:** P. **Product licence number:** 0113/0097. Further information is available on request. **FISONS Pharmaceutical Division:** Coleorton Hall, Coleorton, Leicestershire, LE67 8BU. **OPTICRON, RESISTON** are registered trademarks of FISONS plc.

**Resiston ONE**

**FISONS**  
Pharmaceuticals



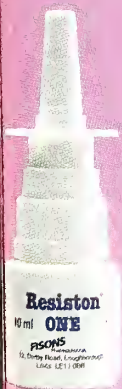


# Simple solutions for hayfever

When you're asked for hayfever treatment, keep it simple, recommend Opticrom and Resiston ONE, topical treatments your customers can trust.

Opticrom Allergy Eye Drops and Resiston ONE nasal spray offer hayfever sufferers fast, effective treatments that make sense. They work directly at the site of the problem, don't cause drowsiness and carry minimal risk of potentially serious drug interactions with systemic medication.

Oral hayfever treatments take time to work, some may interact with commonly prescribed drugs and some cause drowsiness. It's hardly surprising that since topical treatments were made available OTC they've grown from strength to strength. Opticrom and Resiston ONE - simple solutions you can bank on.



## Topical treatment for hayfever eyes and noses



# Teamwork

The efforts of Mr M and his staff have turned this failing business into a flourishing pharmacy. Due to its size, there is little space for expansion, but still plenty of room for improvement, says  
**John Kerry**

The population of this northern city's suburb must have been delighted when a new pharmacy opened just opposite its four-GP health centre ten years ago.

Of course, not quite everybody was pleased, the owner of the pharmacy in the centre of the High Street, more than 500 yards further away, was naturally peeved. He had been picking up the lion's share of the health centre's scripts until this 'leap-frogger' dared to take advantage of not only an obvious commercial opportunity, but his own foolishness in not plugging the gap.

The new pharmacy turned out to be the exception that proves the rule, that *position* is the main key to success in retail. It didn't take off like the proverbial rocket as had been anticipated by its owner, a local multiple concern.

This is a small shop (under 350sq ft) and, because it was the runt in this group's litter, it received the least able manager and staff, who failed to provide the service that the willing patients wanted. Five years on,

after a series of poor managers, this problem child was disposed of to a national multiple, which in turn failed to improve on the \$100,000 per annum turnover and 1,100 script items a month average.

Mr M then purchased the failing business for a fire-damage price, because he knew that the one worthwhile asset of the pharmacy remained – its prime location. Five years later, the business has a \$250,000 per annum turnover and a monthly prescription count of 3,000 items, showing a healthy net profit, after directors' remuneration and dividends.

## TRANSFORMATION

This transformation is due to Mr M's hard work and good management, but he is the first to admit that he could not have done it without excellent support from his staff. Because the shop is small and 90 per cent of the business is in prescription items, it has been run with just two part-time assistants, never more than one of them on duty at any time.

Janet has been with Mr M since

he bought the business and, without any doubt, is the definitive 'one in a million'. She not only clearly enjoys her work but shows a real enthusiasm for the business and its progress. Of course she knows every patient and customer by name, and their medical problems, finding time for a brief, friendly word with everyone, even when the shop's bustling with people, as it often is these days.

Mr M and Janet are the 'X' factor that can turn a lame duck of a shop into a thriving business. If the pair of them were able to bottle their talent, it could be sold for a king's ransom. It's all about good service and, at this pharmacy, you get it by the bucketful.

Not every aspect of this business is ideal. Far from it, in fact, and naturally Mr M is very keen to identify the problem areas and sort them out.

There are two that neither Mr M nor his staff can do much about. As mentioned, this is a small shop with little or no room for expansion. So, whatever he does in the future with this business, it will be done in the

confined space that he currently has.

The site, although ideal for prescription business, is not a great deal of use for run of the mill counter sales, being at one end of a three-quarter-mile High Street. There is a long-established pharmacy at the heart of this busy shopping road, in a well-fitted and clean-looking, attractive unit. Doubtless this shop, Mr M's main opposition, still pulls in a brisk counter trade, despite the fact that customers cannot draw up and park outside.

There are a number of weaknesses in Mr M's business, which can be corrected, and some other opportunities worth investigating.

The front of the shop is pretty dated, uninviting and certainly no credit to the professionalism of the people inside. The fascia sign displays a previous business name prominently, but not the words 'chemist' or 'pharmacy'. The window is festooned with film processing laboratory posters. However, although it may be important to publicise the D&P service, it shouldn't become the most prominent part of the fascia.

Being that the shop is on a busy main road and half-concealed by a large, covered bus stop, it needs to be made much more visible to passers-by, particularly motorists.

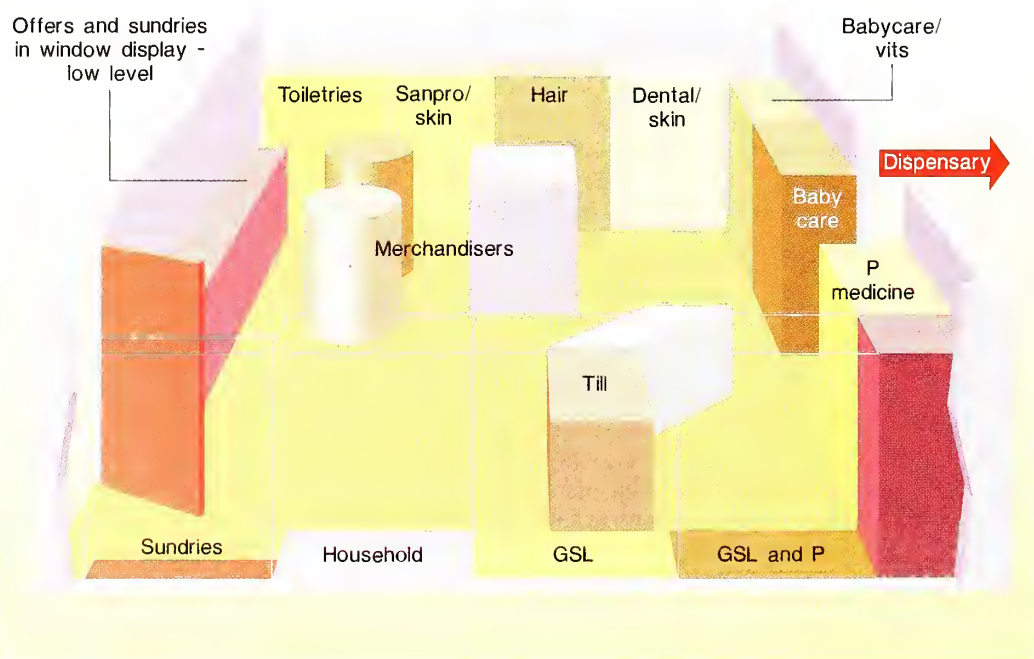
## OUTSIDE UPDATE

- New fascia sign – preferably illuminated, the most prominent word on it being chemist or pharmacy.
- Large cantilever box sign of the Green Cross variety, as high up the fascia as aesthetics and the local council will allow. This will act as a beacon to motorists and pedestrians approaching from both directions.
- Cleaned up window with posters kept to a bare minimum.
- It would be worth trying some window graphics high up on the glass to advertise the professional services available. These will catch the eye of passing traffic, as well as the top-deck bus passengers.

Customers of this pharmacy can buy almost anything that

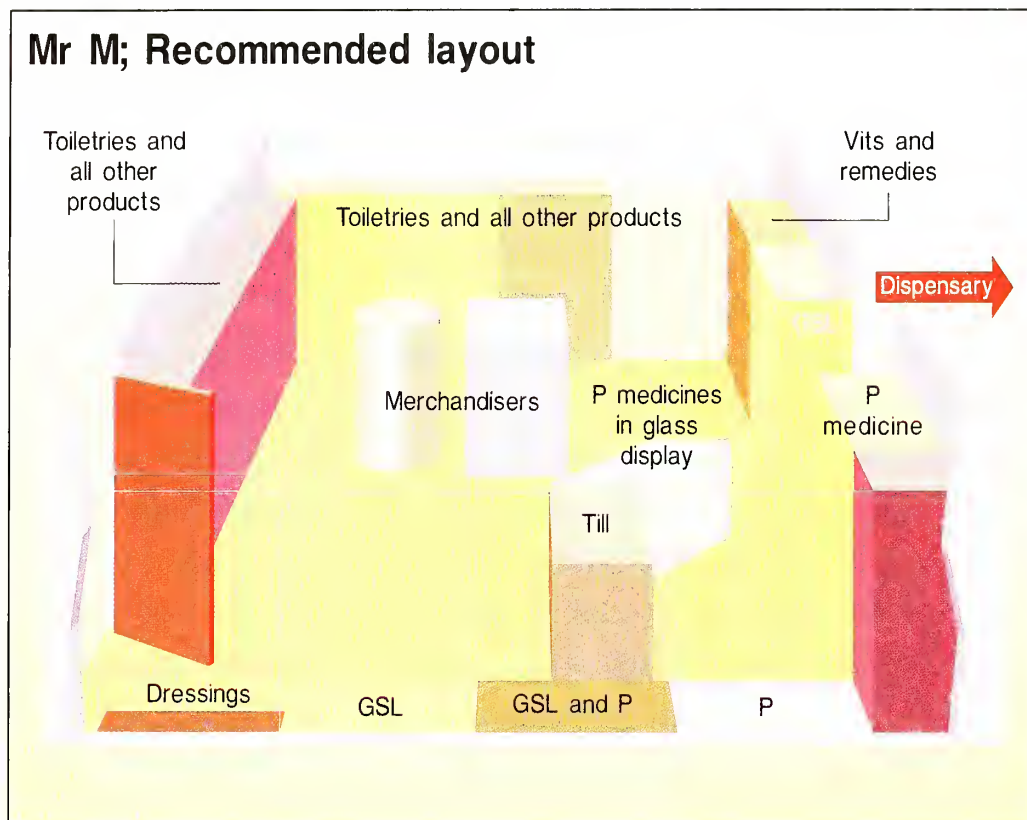
### Mr M; Existing layout

Offers and sundries in window display - low level





# Mr M; Recommended layout



## Type of shop: limited company – independent pharmacy

**Location:** main road, secondary position

**Doctors:** four GPs in health centre 30 yards away.

**Competition:** three other pharmacies within a mile.

## Trading and profit and loss account for the year ending July 31, 1994

Profit and loss 1993	year end 31/7/94	6 months – 31/1/95
<b>Turnover</b>		
Counter	31,500	17,000
NHS	244,000	139,000
	239,000	275,500
<b>Cost of sales</b>		
Opening stock	19,000	
Purchases	201,000	
Discounts received	(9,000)	
Less closing stock	(22,000)	
	189,000	
<b>GP</b>	86,500 (31%)	
<b>Other income</b>		
Rents	3,500	
	90,000	
<b>Expenses</b>		
Directors' remuneration	6,000	
Wages	6,600	
Social security	200	
Locum fees	2,600	
Audit/accountancy	2,000	
Bank charges and interest	400	
Rent/rates	1,300	
Subscriptions	900	
Heat and light		
Telephone	600	
Motor	2,700	
Vehicle lease	–	
Post and stationery	600	
Repairs and renewals	3,400	
Sundries	1,100	
Insurance	1,000	
Depreciation	2,200	
Legal and professional	600	
	32,800	
<b>Profit before tax</b>	57,200	
<b>Dividend paid</b>	45,200	
	11,524 (4.2%)	

they might expect to find in a much larger shop. But the shortage of space means that their choice will be limited and, since some of the merchandising priorities are wrong, they will have to search or ask for items which should be highly visible.

Mr M knows that he'll never achieve a big turnover in toiletries, hair care, baby care and the like. He has neither the position nor the size to exploit these markets. As this is an area also slipping away from the larger, well placed independents, he might as well just stock enough to provide a service to the patients who occasionally find themselves short of a tube of toothpaste and can't be bothered to travel to the supermarket to save a few coppers.

This business' future potential strength is in its large and growing customer base, made up principally of patients. This is their source of healthcare prescriptions and should be for all other healthcare lines: OTC medicines, dressings, dietary and dietetic, vitamins and supplements, complementary medicines and remedies, etc.

● Fifty per cent or more of available front shop space should be given over to healthcare products. All other products should play second fiddle to this and be regarded as service lines only.

The suggested revised front shop layout puts healthcare products in all of the prominent positions. Importantly, high-demand lines, such as brand leaders, seasonal lines and TV

advertised products, should have high visibility at eye level with multiple facings.

The desired impact on the patients on entering the shop will be achieved if they are able to see a large display of medicines and allied products, and virtually everything they may wish to buy is displayed both properly and prominently.

Over the counter medicines have particular benefits to pharmacy and, although this is often realised, it is seldom capitalised upon. Pharmacy is the only retail business able to sell all products in this market and, because the margins are generally much better, not only does one not have to compete but the profits generated are very much higher.

Space is important in all pharmacies, particularly in one such as this. One hundred pounds of soap and proper products will occupy four times as much shelf space as \$100 of medicines, and earn perhaps half the profit. Therefore, it is fair to say that a shelf of medicines is worth eight times as much to the business as one full of cheap shampoo, assuming that they sell at the same rate.

## OTHER ADDITIONS

● A small consultation area should be added, with healthcare leaflet rack and display space – away from the till.

● A more comprehensive practice leaflet is required with emphasis on healthcare services and products. Opening hours should be stressed also, since this pharmacy is open later than others in the vicinity.

● There needs to be leaflet distribution to all dwellings in the catchment area of the pharmacy.

A good team runs this pharmacy, they instinctively know all there is to know about providing a friendly and efficient prescription service, and that's why they have turned this business around.

The retail side is virtually undeveloped, but chasing those mythical toiletry sales is a mug's game in a tiny independent shop distant from the prime shopping area. Approximately 30 per cent of the shelf space is merchandised with medical lines, this should be doubled. This new layout will not have a bad effect on toiletry sales, they only contribute \$50 a day to the takings anyway.

New customers and patients can be attracted by a tidier more prominent front, as well as some modest, professional marketing activity. It will never be a \$1 million turnover pharmacy, but there's a lot more scope for expansion, and Mr M and Janet will take it in their stride.



## The great debate on brands and margins

I was delighted to see that **Xrayser** has added to the debate on the Proprietary Association of Great Britain's initiative to look at ways for the industry to support independent pharmacy. He passed comment upon my contribution at the PAGB members meeting and I feel I ought to clarify my arguments for your readers.

You may recall that I referred to the practice of the pharmacist switching sales from branded to generic ibuprofen. My comment was that: "During 1994, independent pharmacy would have made more profit from selling Nurofen at standard trade margins than it would have made from selling generic ibuprofen even if they received their stocks free of charge". The difference comes, of course, from the relative rates of sale of the two products.

At this meeting there was a plea from the National Pharmaceutical Association for higher OTC margins generally, suggesting that this should reflect the professional input required to supervise the sale. I have few problems with the sentiment behind this request (after all, I am a pharmacist), but it seems incongruous that pharmacists should sacrifice a higher cash return on a branded product to support a non-RPM generic.

Branded products are all sold at the same price, avoiding invidious price comparisons between different retailers. Surely this is a much better way to promote customer loyalty than to use cut-price tactics in a war they can never win against the buying muscle of the grocers!

I also aimed to compliment the innovation of the industry which invests in new products, research and development, training and (yes!) marketing to bring customers to the pharmacy. In

the years 1992-94, the OTC market grew by 20 per cent. New products accounted for 16 per cent, and Pharmacy-only products for 15 per cent. We can hardly deny the industry's contribution to the prosperity of pharmacy.

A few other facts may be worthwhile bearing in mind. Taking the pharmacy analgesics market alone, almost two-thirds of volume sales are for generic products, but this amounts to slightly more than a quarter of cash sales. If all Nurofen sales were converted to generic ibuprofen, then the whole market would decline by 6 per cent and the loss of profit to pharmacies (excluding Boots) would be in the region of £1.65 million. That is a loss of around £160 per store. Need I say more!

**John Lawson**  
Reading

## Hot and cold in the same breath

In your report of the LPC Conference held on May 21, Peter Schofield (Cambridge) is quoted as saying that the conference was a "constitutional inanity", and urged LPCs to "let PSNC do the job we have elected them to do".

'Auto pilot mode', I presume is what he means, with no need for accountability to LPCs or contractors.

I do not accept his point of view, but can understand it was expressed out of misguided loyalty. But he then compounds the issue by taking the platform and saying it is unrealistic to have a national threshold, etc, etc. He also highlighted rural problems in Cambridgeshire.

All the very reasons why a conference should be called!

It seems to me that Mr Schofield wants it both ways – to deprecate the calling of the conference and at the same conference raise very serious issues affecting contractors in his area.

I am sure that contractors will want nothing to do with a man who can blow hot and cold in the same breath.

**B D Vyas**  
London N2

## Speaking out against the 'culture of death'

Permit me to make a few comments in the wake of the publication of my article in *C&D* on February 25 and subsequent correspondence on the subject of dispensing abortifacient pills.

Dr Cave (**Letters** March 18) questions the evidence that intrauterine devices (IUDs) are abortifacient. If Dr Cave had cared to check the references I cited, he would have seen that the manufacturers of copper IUDs state within the patient insert that the action is to "prevent implantation of an already fertilised ovum".

Mr Craske from Leeds (**Letters** March 1) asks the question is human life so sacred that other factors, such as "wars, health budget priorities and unwanted children", need come to bear?

The reality is that the right to life is the basic right upon which all other rights are built. If the right to life principle is conceded for one group of human beings, eg babies in the womb, then it is undermined for all.

Many thanks to the number of pharmacists who wrote to me or phoned from all parts of the UK and Northern Ireland. I am not the only pharmacist thinking along these lines.

Finally, the pharmacy profession's leaders seem only too ready to play into the hands of the Family Planning Association's vested interests. The FPA is an organisation dedicated to promoting abortion and abortifacient contraceptives. The FPA seems intimately associated with the decision-making mechanisms within our profession, currently manifest in the move to deregulate the morning after pill.

The FPA and its worldwide affiliates are well recognised as identifying, targeting and enlisting medical, legal and other organisations to assist them further in their anti-life views. Is the pharmacy profession, a profession apparently standing for the promotion of health and prolonging life, going to allow itself to be a passive co-operator by default in this

further promotion of the 'culture of death'?

**P McCrystal**  
N Ireland co-ordinator,  
Pharmacists for Life  
International

## Memoirs of a delegate

Having given up a Sunday to attend the recent LPC Conference, I can only agree with David Sharpe that it was "a waste of time". As I understand the events, PSNC had already been mandated to call a conference by a resolution from Liverpool LPC. The necessary 25 signatories having been obtained (by various means!), PSNC had no choice but to call a conference. For John Donoghue to then ask why PSNC had called a conference seems to be the most stupid question I have ever heard asked at such a gathering.

I don't know what Mr Donoghue has in mind for himself or the profession, but Sunday clearly illustrated that he is prepared to waste everyone's time (not to mention colleagues' money) to attain it. David Sharpe allowed him to shoot himself in the foot, and his loyal LPC secretary obviously knew what was coming and stayed away.

The most dangerous aspect of Mr Donoghue's involvement is the fact that he is, perhaps, guilty of allowing political ambition to cloud his judgment. Is he a frustrated PSNC candidate? I don't recall him standing for election. This profession elected PSNC, for better or worse, to represent the community sector in discussing remuneration with the Government. It did not elect Mr Donoghue, or Jeremy Clitherow, for that matter, and I personally do not admire these two gentlemen for trying to carve out a new power-base for themselves and expect their fellow contractors to pay for it.

I would exhort Mr Donoghue and his colleagues at Liverpool to think carefully before proposing resolutions that end up wasting many thousands of pounds, and to either stand for PSNC election or, to put it bluntly, be quiet.

**M J Mansour**  
St Helens & Knowsley LPC



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# BTC prescribes more stores

In spite of increased competition from other chains, Boots the Chemists' store expansion remains unabated.

At the company's year end results, chief executive Sir James Blyth revealed that there are 45 small stores in the pipeline for this year. A further 36 opened during the last financial year and eight were located to larger sites. There were 14 extensions to existing outlets.

He said that some of the retail businesses have been trading in competitive markets, referring to BTC's increased competition from the supermarkets, Lloyds and new contender Superdrug.

BTC was the main cash generator, with the 1,100-strong chain accounting for \$350 million of the group's profits. The division had actual sales of \$2.9 billion, an increase of 4.8 per cent, and like for like sales of 3.9 per cent. Dispensing sales increased by 11.8 per cent and OTCs were up by 3.3 per cent.

Gross margins increased by 0.4 per cent, producing a rise of 0.2

per cent for the year. The company maintained that margins were held back by an increase in development costs for the \$11m No7 cosmetics' relaunch.

The Boots group's cash pile has swollen to around \$600m after the sale of its pharmaceuticals division to BASF.

The group is considering an OTC acquisition in order to strengthen Healthcare International. Sir James said: "We are looking for a company with great critical mass in the German market but, as everybody is trying to expand in the OTC market, we are anxious not to pay too much." If a "sensible" acquisition isn't found, chairman Sir Michael Angus maintained that there "were no inhibitions" about considering a share buy-back.

Group profits increased 8.4 per cent, before exceptional gains, to \$525.6m on a turnover of \$4.3bn. Earnings per share were 65.7p and total dividend for the year was 17p, 13 per cent up on 1994. Boots maintained that it was ranked second after Marks &

Spencer in giving the highest shareholder return in the five years to March.

Sir Michael pronounced the figures a "sound result". "In an active year, we have undertaken the largest share purchase in UK corporate history, and with the sale of Boots Pharmaceuticals rebalanced the business portfolio," he said.

Sales, which fell 10.6 per cent in the healthcare division, were affected by the unloading of the Farley business. Profits were also down (by \$11.5m to \$9.8m) because of the loss of Farley and increased investment in the Nurofen brand.

The optician shops, with a 16.7 per cent increase in sales, benefited from a High Court decision to make dispensing services VAT-exempt.

Childrens World showed a \$500,000 profit for the first time, which was hampered by the decision to withdraw sales of cot mattresses following a health and safety scare.

Over \$52m was spent on acqui-

sitions, including a shopping parade in Coventry and retail parks in Kilmarnock, Redhill and Taunton.

Sir Michael praised Gordon Hourston, who steps down as managing director of BTC at the AGM in July.



Boots' chief executive Sir James Blyth: looking for OTC buy

## Gehe builds new AAH board

AAH now has a slimmed-down board dominated by Gehe personnel, following the resignation of six of the original directors.

Gehe chairman Dieter Kammerer will take the chair and he has brought in Stefan Meister from Gehe's Stuttgart office as finance director.

David Taylor, managing director of AAH Pharmaceuticals, has joined the new board, along with Gehe director Dr Karl-Gerhard Eick, who will serve in a non-executive capacity. Gary Greenhalgh, who is responsible for the

environmental services division, is the only surviving original board member.

Takeover casualties include merchant banker John Padovan, who joined the board in 1992 and was appointed chairman in 1993, and Bill Revell, who has been with AAH for 25 years and was made group managing director four years ago. Both resigned on May 31. Finance director Andrew Wallis has also resigned, along with non-executive directors Angus Clark, John Townend MP and Michael Hart.

## Unichem's £7.1m acquisition

Unichem has added a further 15 pharmacies to its Moss Chemists chain, increasing its number of outlets to 379, following the recent acquisition of the Roberts Group.

The Roberts' pharmacies were bought last week for \$5.45 million in loan notes and cash. A further \$1.6m cash payment will be made for net assets.

Two shops in the Roberts' chain, which has collective annual sales of \$9.3m, operate within Morrison superstores, and

will provide Moss with more opportunities to develop pharmacies in the grocery sector.

All supplies for the 15 shops will immediately switch to Unichem, and Roberts' own OTC warehouse in Newcastle will close with the loss of two jobs.

● Unichem chief executive Jeff Harris has revealed that, following difficulties with its over the counter invoicing system, the company's OTC sales are down 5 per cent against a general market decline of 2 per cent.

Revolutionary Cantassium Microvitamins including Folic Acid in easy-to-use Klik Packs – your quick route to healthy profits in this fast expanding market. Easy to take, easy to display and easy to sell.

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## Zeneca rumours

Zeneca's share price soared 31p to 995p after shares were traded heavily this week. City pundits are predicting a sale of the agrochemical business or a potential bidder.

## Tents to drugs

Black & Edgington is making the move from marquees to generics with the option to acquire development and licence agreements for two diabetes drugs. Chairman Ian Gowrie-Smith, late of Medeva, is planning to change the company's name and is applying for a full stock market listing.

## Directors go

The resignation of Wellcome directors continues. Dr David Barry, Wellcome's group director, research and development and medical affairs; Keith Merrifield, group marketing director; and Philip Tracey, North American operations director, have resigned as executive directors. Mr Tracey's responsibilities for OTC business strategy have been transferred to James Cochrane.

## Skin care MBO

Australian natural skin care company Blackmores is finalising a management buy-out in the UK, which will give the management in this country complete autonomy. Blackmores UK will continue to work in partnership with its Australian parent.

## More space

Welsh wholesaler L Rowland is investing £650,000 in warehouse expansion. The company has bought a new automatic picking machine and has acquired a further 8,000sq ft of warehousing space.

## Turnover up

Turnover at United Drug rose by 29 per cent to IRE103 million in the half year to March. Group profits increased by 14 per cent to IRE2.3m. Sangers is said to have increased its market share in Northern Ireland, further enhanced by the acquisition of Harold Mitchell & Co at the end of February.

## Schwarz Pharma expands

Schwarz Pharma, the German pharmaceutical company, has acquired two US companies – Central Pharmaceuticals (Indiana) and the Reed & Carnrick division of Block Drug Company (New Jersey) – for \$294 million.

# Sale pressure off LIG

London International Group still has a 'for sale' sign over brands in its health and beauty portfolio, but no longer feels under pressure to sell if the price is not right.

Following disastrous results last year, the company gave a bullish progress report on the first year of a three-year recovery plan when its annual figures were released last week.

The company sold its photo-processing operation last September and a number of brands from the health and beauty stable. Further disposals are "imminent": this is understood to be an Italian business, not the Eucryl, Goddards or Woodwards brands familiar to UK consumers.

LIG chief executive Nick Hodges says the company is looking to raise \$30-\$50 million from disposals, leaving \$50m turnover in the health and beauty area. Last year, it realised \$12.9m from the sale of UK cough medicine brands and Wrights soap.

Having produced \$115m from a rights issue last June, Mr Hodges says the company has exceeded the targets it had then set itself. Pre-tax profits were back to \$15.2m, after exceptional charges of \$2.8m, compared to losses of \$175.1m in 1993-94. A dividend payment of 1p per share is to be paid after a year's absence.

Earnings per share were 4p, and gearing was reduced to less than 40 per cent. For the year to March 31, total sales were \$318.1m, which included a figure of \$31.4m from the discontinued D&P operation.

Sales of family planning products increased to \$100.4m with underlying growth of 9 per cent. Sales in the UK were up 21 per cent, mainly due to a relaxation in price controls.

The Avanti polyurethane condom was launched in 13 west coast states of the US and is currently being rolled out nationally. The next step will be a European

launch, but LIG is not committing itself to a date.

Significant growth was achieved in the Biogel surgical glove business, with sales up 32.8 per cent to \$51.4m, driven by strong growth in the US. Sales of household and industrial gloves improved by 12.9 per cent to \$41.2m.

The turnaround in the group's fortunes has seen a round of factory closures and the number of employees slashed from 10,250 to 4,864 in the past two years.

The Chingford condom factory has closed, along with the Llanelli surgical glove factory – with production being switched to the Far East – and the Italian syringe business has been sold.

Goals for the coming year include growing profits and margins – at 9.3 per cent there is some way to go to LIG's target of 15 per cent by 1997. The company is also keen to acquire new businesses in its core areas.

## New NAS code of conduct

The National Association of Shopfitters has launched a code of conduct for members.

The code, consistent disregard for which could result in expulsion from the register, expects members to offer assurances on service, skills, awareness, responsibility and knowledge. The Association has approximately 200 members.

● The Shop and Display Equipment Association has published its directory for 1995/96. The guide, which provides an A-Z guide to display equipment and services, normally sells for \$7.50, but readers can pick up a copy for a price of only \$5 by photocopying this page and sending it to: C&D Directory Offer, SDEA, 24

Croydon Road, Caterham, Surrey CR3 6YR.



Don't miss C&D's special offer on the SDEA directory: Lawrence Cutler, director, and Gail Softley, assistant director, get ready to ship their 'bible'

## Amersham fails to meet market expectations

Pre-tax profits for the health science group Amersham International may have risen by 9 per cent – to \$47.3 million – but the result failed to inspire the market.

Shares fell 11p to 894p following the announcement.

Turnover was up 3 per cent to \$333.6m on last year's \$342.2m. Underlying turnover growth,

allowing for exchange rate fluctuations and product-line rationalisation, was up 6 per cent.

Amersham Healthcare grew strongly to \$13.7m (\$9.4m) benefiting from a full 12 months' sales of Metastron, the pain-killer for cancer; and the launch of Myoview, used for imaging the heart.



The Accuhaler, a dry-powder inhaler for asthma treatment, has won a British Design and Art Direction award for excellence in product design in the health and leisure category. The product was designed for Allen & Hanburys by Paul Rand (top) and David Hearne (bottom), with input from patients



# Don't miss your opportunity.



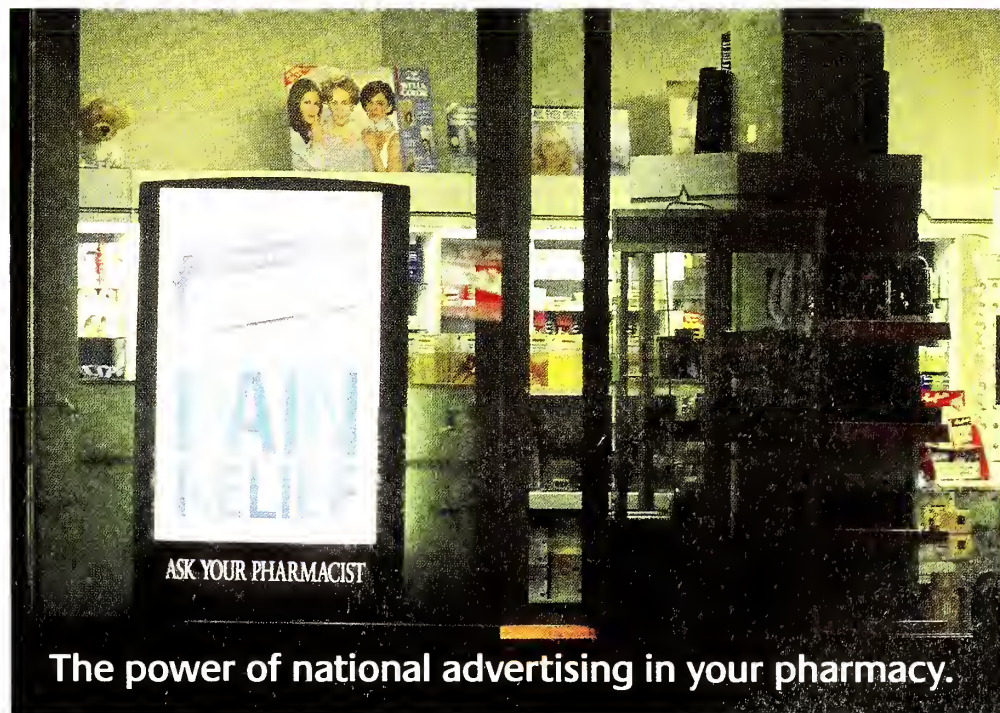
One of these folders will be included with the June NPA Supplement. Please return the reply-paid card as soon as possible to avoid disappointment. If you have not received your copy please telephone 0800 374630.

PharmaSite™ is the remarkable new advertising service endorsed and promoted by the NPA. Take a close look at your copy of the PharmaSite folder and you'll see it contains an exciting opportunity for independent pharmacies.



If your pharmacy is in a prominent location, you could be among the first 2500 independents nationwide to have illuminated poster frames installed. There is no cost to you. Pharmaceutical manufacturers will be contracted to advertise in the frames so PharmaSite brings the power of national advertising right into your pharmacy.

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# High Street takes the slow road to recovery

Economic indicators point to a protracted but strong revival this time around. **Peter Varley** reports

**B**usiness in the High Street is not buoyant, but inflation is under control and growth easing. There is a rising possibility that this recovery will endure longer than the boom-and-bust cycles of recent decades.

High Street sales are showing renewed weakness, with the Central Statistical Office figures suggesting a 0.2 per cent fall in total volumes during April.

Between February and April, the volume of sales was 0.3 per cent higher than in the previous three months, and 1.6 per cent up on the same period a year ago.

The latest survey from the Confederation of British Industry shows a healthy rise in annual retail sales volumes in April, but confirms that the three-monthly trend of underlying sales was virtually flat. Chemists were among those indicating the strongest volume increases. Business was

judged to be slightly above average for the time of year.

The volume of stocks held by retail chemists was considered too high in relation to expected sales for 9 per cent of survey respondents – down from 25 per cent three months ago.

Factory output in the first quarter saw the first retrenchment since the recovery began in 1992. Output in the first quarter of 1995 was 0.1 per cent below the previous quarter, although 3.4 per cent higher than the year before. Chemicals remained relatively buoyant, with output growth of 1.5 per cent between the two latest quarters, and a 5.1 per cent increase over a year ago.

Pharmaceutical and consumer chemical manufacturers have been less badly hit by cost pressures. But there are fears they are about to face substantial increases, while prices for the domestic market continue to weaken.

## PRICES AND COSTS

### Retail prices (Jan 1987 = 100)

All items	Apr	149.0	147.5	3.3
Chemist's goods	Apr	162.4	160.7	3.7

### Producer prices (1990 = 100)

Manufacturing industry, exc food	Apr	116.9	116.4	4.2
Chemical industry	Apr	120.2	118.8	7.3
Pharmaceuticals	Apr	107.4	106.9	-0.2
Toilet soap	Apr	133.5	132.4	0.6
Perfumes, cosmetics, toilet preps	Apr	124.0	123.6	1.9
Make-up preparations	Apr	125.7	125.6	0.9
Toothpaste and powders	Apr	125.6	123.7	4.9
Surgical and medicated dressings	Apr	115.8	111.8	-1.4
Photographic materials, chemicals	Apr	115.9	116.7	5.3

### Average earnings (Jan 1990 = 100)

Whole economy	Mar	130.2	125.9	4.2
Chemicals, chemical products	Mar	141.6	134.0	5.4

### OUTPUT (1990 = 100)

Chemicals, man-made fibres	Q1	116.5	114.8	3.6
Pharmaceutical products	Q1	137.2	132.8	4.9
Perfumes, cosmetics, toiletries	Q1	88.7	81.9	0.2

## SALES

### Consumer expenditure (current prices)

Total, £bn	Qtr4	108.6	107.3	4.6
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### Retail sales (value, 1990 = 100)

All retail businesses	Apr	120	115	5
Chemists	Feb	114	109	6

## OTHER BUSINESS INDICATORS

Consumer credit – net lending (£m)	Mar	439	582	33.0
Unfilled vacancies ('000)	Apr	182.6	162.4	24.3
Claimant unemployment (%)	Apr	8.3	8.4	-13.5

Sources: Central Statistical Office, Department of Employment

Unit costs are expected to rise by 26 per cent of companies; only 10 per cent predict a reduction. The net balance of 16 per cent predicting higher costs compares with 2 per cent previously.

Overall activity remains strong and is likely to continue, but with faster export growth in key European markets compensating for a slowing domestic demand.

Sales by British pharmaceutical makers remain on a strong upward trend. Total production rose by 3.3 per cent in the first quarter of 1995, 4.9 per cent up on the same time in 1994. Sales by perfume, toiletry and cosmetic manufacturers improved by 7.1 per cent in the first quarter, but were only 0.2 per cent higher than a year before.

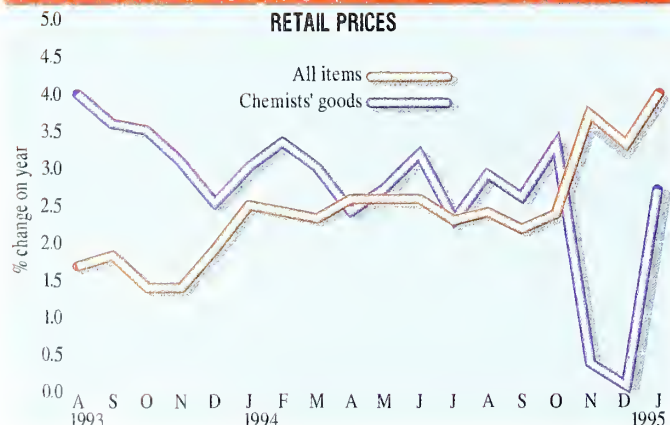
## MANUFACTURERS' PRICES OF PHARMACEUTICALS DOWN ON A YEAR AGO

### PRODUCER PRICES

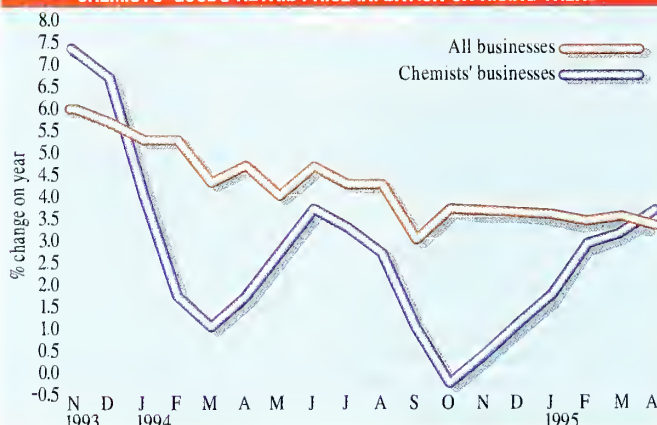


## RETAIL CHEMISTS' SALES ARE PICKING UP

### RETAIL PRICES



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Ring Nick Fisher (01732) 377272 for further information.

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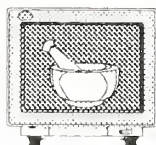
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Appointments, situations wanted, and businesses for sale will be incorporated as lineage advertisements under the appropriate Classified headings.

To: Business Link, CHEMIST & DRUGGIST, Miller Freeman House, Sovereign Way, Tonbridge, Kent TN9 1RW.

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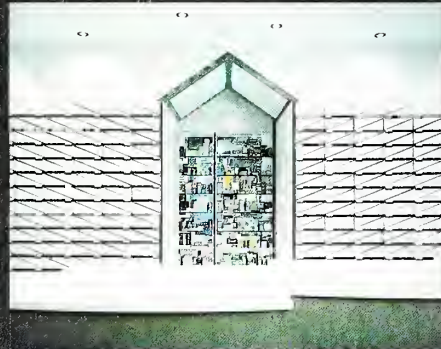
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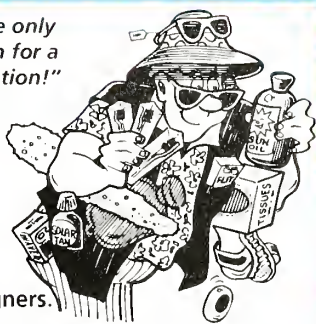


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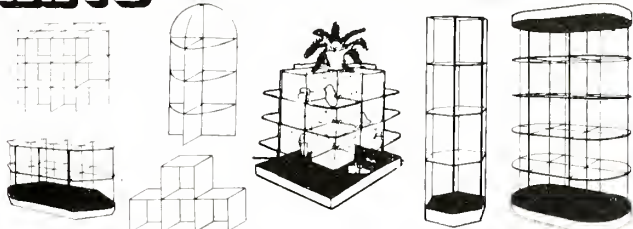
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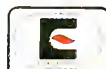
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# ABOUT people

## Bowled over by Howards' Hot Hs!

More than 170 Numark pharmacists and their assistants abandoned their dispensaries to take part in sporting events organised by two of the company's distributors recently.

The third annual East Anglian Pharmaceuticals' bowling competition, sponsored by Roche Consumer Health's Aspro brand, attracted 120 players.

Staff from Howards Pharmacy and Bowthorpe Pharmacy in Norwich joined forces to form 'The Hot Hs' (referring to Howards Pharmacy and Hamblin's Chemist, which pulled out at the last minute) to win the Aspro Cup.

Meanwhile, Graham Trafford & Co, the Portsmouth-based Numark wholesaler, held its annual golfing day at Cams Hall golf club in Fareham with over 50 pharmacists taking part.

The winner of both the men's shield and the longest drive competition was Glynn Williams of



The Hot Hs with pharmacists Colin Howard (fourth right) and Alan Turner (kneeling); Nigel Conquest (far left) from Roche Consumer Health; and Jonathan Briggs (second left), managing director of East Anglian Pharmaceuticals

Williams Chemists, Worthing, and the team prize for the nine-hole morning tournament went to Mohan Nijkar and Patrick Leopard of Nijkar & Tozer (Ports-

mouth and Bedhampton branches); Colin Herring of Herring & Davies; and Henry Olswang of Queens Park Pharmacy in Bournemouth.

## APPOINTMENTS



Dr David Horrobin

The University of Dundee has appointed **Dr David Horrobin**, chief executive of Scotia Pharmaceuticals, as an honorary visiting industrial professor. GWS Shop Equipment & Shopfitting has appointed **Gordon Bradley** as export manager and **Dave Heaver** as business development executive. Gretag Imaging UK has promoted **Andrew Pearce** to minilab sales manager and **Sharon Walker** to marketing services manager.

**Neville Edwards** has been made publications director of Selfmedication International, part of the IMS/Nielsen group. **Mark Lowenthal** has been made regional president of Revlon Consumer Products Worldwide with responsibility for the UK, Europe and the Middle East.

## COMING EVENTS

### Numark lines up conference speakers

Numark has lined up representatives from various sectors of the pharmacy world to speak at its annual conference to be held on October 25-29 in Barcelona.

Ian Jones, professor of pharmacy practice at Portsmouth University and secretary of the Institute of Pharmacy Management International, will report on prospects in community pharmacy and contracts with the Department of Health.

Dr Jurgen Rassat, vice president of Rhone-Poulenc Rorer, will attend on behalf of the Self Medication Business Group, Europe, and will look at the implication of self-medication on pharmacy business.

Other speakers will include independent community pharmacist Terry Maguire, Tony Arrow-smith, chief executive of Barkers Advertising, and Zeneca Pharma UK commercial director Terry Scholes.

Further details are available from Val Roberts on 01827 69269.

### ADVANCE INFORMATION

**The National Association of Health Authorities & Trusts** is holding its annual conference and health fair on **June 29-30** at the Scottish Exhibition and Conference Centre, Glasgow. Details on 0121 414 1536.

A two-day **Human Sciences** conference on 'Drug policy in the 90s changing climate' will take place on **June 29-30** at Liverpool's John Moore University. For further details contact: Paul Jones, Enterprise, Liverpool John Moores University, Egerton Court, Rodney Street, Liverpool L3 5UY.

**The Pharmacy Support Group** has rescheduled its seminar on 'Business opportunities in the NHS' to **July 2** at the RPSGB HQ, 10-4pm. Topics include sources of, and how to attract, funding; costing out a funding bid; identifying consumer health needs; and IT in the NHS. For details contact Hemant Patel, tel: 0181 984 9943.

**The British Institute of Regulatory Affairs** is holding a meeting on management skills 'Aiming high: successful negotiation with licensing author-

ities' on **July 3** at Latimer House, Chesham, Buckinghamshire. Details from BIRA on 0171 499 2797.

**The Society for Medicines Research** is holding a residential meeting on 'Age related disease: prospects for therapy' on **July 9-12** at St Martin's College, Lancaster. Contact the SMR secretariat on 0171 581 8333 for information.



The eighteen pharmacy assistants pictured here from County Durham are the first to achieve the new NVQ Customer Service Level 3. Pharmacist Elaine Noble has also successfully completed the assessor's training programme



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